4434



Gloucestershire County Counc



# Annual Report

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1959

GEO. F. BRAMLEY

County Medical Officer of Health



1-21

# INDEX

												Page
Introdu	CTION	• • •	• • •	• • •		• • •		• • •	• • •	• • •		2
STAFF		• • •	• • •	• • •		•••	• • •	• • •	• • •		• • •	4
SECTION	A-Stati	sti <b>c</b> s and	d Social	l Condi	tions o	f the (	County		• • •		• • •	6
SECTION	B—Gene	ral Pro	vision o	f <b>H</b> ealt	h Servi	ices fo	r the C	ounty				
ı.	Laborato	ry Facil	lities	• • •	• • •	• • •		• • •	• • •			8
2.	National	Health	Service	Act, I	946 :	-						
		Health		-		• • •	•••		• • •	• • •		12
	(ii)	Care of	f Mothe	ers	• • •	• • •	• • •	• • •	• • •	• • •		12
	(iii)	Care of	f Childi	ren		• • •	• • •	• • •	• • •		• • •	14
	(iv)	Recupe	erative l	Holiday	Home		• • •	• • •	• • •		• • •	16
	` ` '	Problem			• • •	• • •	• • •	• • •	• • •	• • •	• • •	16
	(vi)	Nurser	ies and	Child :	Minder	s Reg	ulation	Act, 1	948	• • •	• • •	16
	(vii)	Infant	Deaths	• • •	• • •	• • •	• • •	• • •				16
	(viii)	Midwi	fery and	d Home	Nursi	ng		• • •	• • •	• • •		18
	(ix)	Dental	Treatn	nent	• • •	• • •	• • •	• • •		• • •		21
	(x)	Health	Visitin	g	• • •	• • •	• • •	• • •		• • •	• • •	24
	(xi)	Vaccin	ation ar	nd Dipl	ntheria	Immu	ınisatioı	n			• • •	25
	(xii)	Ambul	ance Se	rvices	• • •	• • •	• • •	• • •	• • •	• • •	• • •	27
	(xiii)	Preven	tion of	Illness,	Care a	nd Af	ter-Car	e	• • •		• • •	28
	(xiv)	Home	Help	• • •	• • •	• • •	• • •	• • •		• • •	• • •	36
	(xv)	Mental	l <b>H</b> ealth	ı	• • •	• • •		• • •	• • •		• • •	37
3.	National	Assista	nce Act	1, 1948								
J	Section 2					rsons-						
		Blind		_	_	• • •	• • •			• • •		41
	' '				•••	• • •	• • •		• • •	• • •		44
	` •	Cripple		• • •	• • •		• • •			• • •	• • •	45
Sporton	C—Dise											
SECTION T.	Infection		ICAC									46
	Venereal			• • •	• • •	• • •	• • •	•••	• • •	• • •	• • •	47
				• • •		•••		• • •		• • •	• • •	
SECTION	D-Wat	er Supp	olies, Se	werage	and H	ousing	g Servic	es	• • •	• • •	• • •	48
SECTION	E-Insp	ection a	ind Sup	ervisio	n of Fo	ods						
I.	Milk Su	pply	• • •			• • •	• • •	• • •	• • •			53
2.	Water S	ampling	5		• • •		• • •	• • •	• • •	• • •	• • •	54
3⋅	Food Hy	giene	• • •	• • •	• • •	• • •	• • •	• • •	• • •		• • •	54
4.	Diseases	of Anir	nals (W	aste Fo	oods) C	rder,	1957		• • •			54
5.	Animal 1	Health	• • •		• • •		• • •	• • •	• • •	• • •		55
SECTION	F—Miso	rellaneo	118									
	istered N					• • •						56
-		arome .	z zoiiies	• • •	•••	• • •	• • •	• • •	• • •	• • •	• • •	50
TABLES-		1 =	1									~ ~
	Births ar			• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	57
	Notifiabl			iseases		• • •	• • •	• • •	• • •	• • •	• • •	58-59
111.	Causes o	I Death										60



Health Department,
Berkeley Chambers,
Berkeley Street,
Gloucester.

June, 1960.

To the Chairman and Members of the Health Committee.

MADAM, LADIES AND GENTLEMEN,

The revised scheme of Divisional Administration came into operation in April, and a full review which had to be submitted to the Local Government Commission on boundary changes was prepared. Proposals for the provision of a Chiropody Service were submitted to the Ministry of Health and proposals for the Mental Health Services to conform with the new Mental Health Act were also prepared. A Scheme of Delegation of health and welfare functions to the Borough of Cheltenham under the Local Government Act, 1958 came under consideration. An Organisation and Methods Investigation was going on in the Department and the Cranbrook Report on the Maternity Services was issued which required a review of our arrangements. All these entailed a full investigation and review of all the work of the Health Committee and of the Health Department. As the Minister also forwarded his views on the Working Party's Report on Health Visitors and the Council agreed a five-year building programme, past, present and future developments were carefully examined.

During the administrative enquiries the field work went on unhampered but with a growing intensity. This was associated with a full poliomyelitis vaccination campaign.

Vital statistics again revealed a general improvement in the health of the inhabitants of the County. There were more births than ever before recorded in the County. The infant mortality rate at 17 deaths under the age of one per thousand live births was the lowest ever recorded and is a little more than half of that of ten years ago. There was also a further reduction in deaths from pulmonary tuberculosis, together with a relatively sharp decline in the number of new cases notified.

Although the number of births increased there were fewer babies born at home. This was accounted for by more hospital confinements. The work of the domiciliary midwives was no less because the hospitals, having no more midwifery beds, discharged mothers with their babies before the fourteenth day to be cared for by the midwives at home. In some areas of the County, particularly in the Gloucester Rural, Warmley and Mangotsfield areas, where there has been a great deal of private housing development, there was heavy pressure on the midwives. In spite of this a scheme of relief to reduce the district nurse/midwife's week to one of approximately 44 hours was being implemented. The review of the Maternity Services entailed little new in this County as all the recommendations were already in effect so far as our services were concerned and co-operation with the General Practitioner and Hospital services had already developed.

The number of deaths was less than in 1958 but comparing the causes with previous years, there are some large variations particularly of cancer, coronary disease—angina, other heart diseases and influenza, which do not admit of ready explanation. The variations may be due to more accurate diagnosis, but some of them appear to be quite anomalous. A valid assessment can only be made over a longer period and on national figures.

Vaccination against Poliomyelitis again occupied a lot of time. There was plenty of vaccine available and by the end of the year 80 per cent of children and 40 per cent of young persons had been protected with very few awaiting injections. A large number were not due for the third and, at present, final injection until the early months of 1960. During the year we were able to make up some of the backlog of protection against Diphtheria and Tuberculosis; the continuing need for protection against these diseases cannot be overstressed. Eight hundred more babies were vaccinated than in previous years, probably because this procedure is now being offered at more Child Welfare Centres.

The prevention of dental caries in children is an urgent matter of national concern. The education of parents and children on prevention has been assisted by the appointment of a whole time Dental Health Education Officer. It is believed that this is the first post of its kind in this country.

The Minister of Health has asked that this report should give a description of health education arrangements and this is given on page 35.

In the early Autumn of 1959 somewhat of a crisis developed in the Home Help Service as more helps were being employed than allowed for in the budget. The usual Summer fall in demand had not materialised. There was a continuous and steady increase in the number of elderly and chronic sick persons needing domestic help which in part was due to a shortage of accommodation in Welfare Homes and Hospitals for the Chronic Sick. In the latter more use is being made of short period admissions for rehabilitation. This means that more cases are referred on discharge for home help assistance. The Committee obtained more money for this service, which has continued to grow. It was estimated that if home helps were withdrawn nearly 500 of the 1,600 aged and infirm would need immediate admission to Welfare Homes or Hospital. The preventive aspect of this service—help in homes of expectant or nursing mothers—also increased.

The Mental Health Service expanded during the year, including a newly built Occupation (Training) Centre opened in Cirencester. This is the fifth centre established since 1948. There will be further expansions and development in the community care of mental disorder in future years but we already have a service ready for expansion with some needs clearly defined. How the new look on mental health will develop depends to a large extent on the readiness of the public to accept the mentally disordered into the community outside hospitals, and for those with early symptoms and signs of mental illness to seek psychiatric help at the increased number of Hospital Out-Patient Sessions whilst the need for hospital admission can be prevented.

The other Health Services and Welfare Services for the handicapped have continued to expand their care of the community and individual with increasing demand put on them.

For some years there have been no cases of diphtheria; scarlet fever was prevalent in only a mild form in 1959 and there was only one case of poliomyelitis. In 1959 we had the biennial increase of measles which caused three deaths. Although the number of cases of whooping cough was low, it caused one death. This disease can be protected against and full facilities are available either through family doctors or the Welfare Centres.

Each year more District Councils report that all their areas have either a public mains supply or suitable and sufficient private supplies of water. The prevention of illness and improvement of health through the County Council's personal health services cannot reach their full value without the improvement of housing, the provision of a pure and wholesome water supply and efficient sewerage and sanitary schemes, which are the responsibility of the District Councils.

Mr A. B. Cooke, the Chairman of the Health Committee since its inception under the National Health Service Act, 1946, resigned in 1959. For his personal interest and guidance in the development of the Committee's responsibilities and the work of the staff, I take this opportunity of conveying my personal thanks. I am also personally indebted to the Committee, other Departments and every member of the Department. The Committee will, I am sure, join me in thanking also the large number of voluntary bodies and their workers who assist so willingly.

I am,

Your obedient Servant,

GEO. F. BRAMLEY,

County Medical Officer of Health.

# STAFF

# as at 31st December, 1959

D.P.H., D.T.M. & H.  Assistant County Medical Officers of Health and School Medical Officers Margaret D. Cameron, M.B., Ch.B., D.P.H. Sheila M. E. Grew, M.R.C.S., L.R.C.P. M. J. Gryspeerdt, M.B., B.S., D.P.H. Catherine E. Hignell, M.R.C.S., L.R.C.P. Jean N. Moore, M.B., B.S., D.P.H. Catherine E. Hignell, M.R.C.S., L.R.C.P. Jean N. Moore, M.B., B.S., D.P.H. Mary P. S. Seacome, M.A., B.M., B.Ch., B.A.O., D.R.C.O.G., D.P.H. Mary P. S. Seacome, M.A., B.M., B.Ch. B.A.O., D.P.H. W. J. D. Cooper, M.B., B.Ch., B.A.O., D.P.H. X. T. Hunt, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. S. Knight, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. X. A. T. Hunt, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. T. O. P. D. Lawson, M.D., D.P.H., D.R.C.O.G.  Chest Physicians (part-time) F. J. D. Knights, M.D., M.R.C.P. R. A. Craig, M.D., M.R.C.P. Mrs J. M. Popplewell, L.D.S. Mrs J. M. Popplewell, L.D.S. Mrs J. M. Popplewell, L.D.S. Miss M. S. MacKinnon, L.D.S. J. A. MacPhail A. W. McCarthy, L.D.S. Miss M. S. MacKinnon, L.D.S. J. A. MacPhail A. W. McCarthy, L.D.S. Mrs D. W. Squires, L.D.S. O. A. Thomas, L.D.S. G. J. Tucker, L.D.S. G. J. Tucker, L.D.S. G. N. Willetts, L.D.S. 6 part-time officers		
Deputy Principal School Medical Officer Senior Medical Officer		G. F. Bramley, M.D., D.P.H.
Health and School Medical Officer  Assistant County Medical Officers of Health and School Medical Officers of Health and School Medical Officers  Margaret D. Cameron, M.B., Ch.B., D.P.H. Sheila M. E. Grew, M.R.C.S., L.R.C.P. Margaret D. Cameron, M.B., Ch.B., D.P.H. Catherine E. Hignell, M.R.C.S., L.R.C.P. Jean N. Moore, M.B., B.S. W. W. Ramsay, M.B., B.S., D.P.H. Mary P. S. Seacome, M.A., B.M., B.Ch.  Divisional Medical Officers of Health (also District Medical Officers of Health)  District Medical Officers of Health (also District Medical Officers of Health)  District Medical Officers of Health (also District Medical Officers of Health)  District Medical Officers of Health (also District Medical Officers of Health)  District Medical Officers of Health (also District Medical Officers of Health)  District Medical Officers of Health (also District Medical Officers of Health)  District Medical Officers of Health (also District Medical Officers of Health)  Mary P. S. Seacome, M.A., B.M., B.C., D.R.C.O.G.  R. F. Barclay, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.  W. A. Knox, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.  S. Knight, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.  W. A. Knox, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.  W. A. Knox, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.  S. Knight, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.  W. A. Knox, M.B., B.S., M.R.C.S., L.R.C.P.  Principal Dental Officer  D. P. Lawson, M.D., D. M.R.C.P.  R. A. Craig, M.D., M.R.C.P.  Principal Dental Officer  D. N. de Gruyther, L.D.S.  Mrs J. M. Popplewell, L.D.S.  Mrs J. M. Popplewell, L.D.S.  Mrs D. W. Squires, L.D.S.  Mrs D. W. Squires, L.D.S.  G. J. Tucker, L.D.S.  G. J. Tucker, L.D.S.  G. J. Tuc	Deputy Principal School Medical Officer	Elizabeth M. Sefton, M.R.C.S., L.R.C.P., D.C.H.,
and School Medical Officers  Margaret D. Cameron, M.B., Ch.B., D.P.H. Sheila M. E. Grew, M.R.C.S., L.R.C.P. M. J. Gryspecerdt, M.B., B.S., D.P.H. Catherine E. Hignell, M.R.C.S., L.R.C.P. Jean N. Moore, M.B., B.S. W. W. Ramsay, M.B., B.Ch., B.A.O., D.R.C.O.G., D.P.H. Mary P. S. Seacome, M.A., B.M., B.Ch.  Divisional Medical Officers of Health)  District Medical Officers of Health)  District Medical Officers of Health)  Mary P. S. Seacome, M.A., B.M., B.Ch. R. F. Barclay, M.B., B.S., D.P.H. W. J. D. Cooper, M.B., B.Ch., B.A.O., D.P.H. A. T. Hunt, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. S. Knight, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. W. A. Knox, M.B., B.Ch., B.A.O., D.P.H. T. O. P. D. Lawson, M.D., D.P.H., D.R.C.O.G.  Chest Physicians (part-time)  Margaret D. Cameron, M.B., Ch.B., B.A.O., D.P.H. Catherine E. Hignell, M.R.C.S., L.R.C.P. W. W. A. B.S., D.P.H. W. A. B.S., D.P.H. W. A. B.S., D.P.H. W. J. D. Cooper, M.B., B.S. W. J. Lang, B.S., M.R.C.S., L.B.S. D. P. Lawson, M.D., D.P.H. W. J. D. Cooper, M.B., B.S. W. J. Lang, B.S., M.R.C.S., L.B.S. D. P. Lawson, M.D., D.P.H. W. J. D. Cooper, M.B., B		J. G. McKenny, M.B., B.Ch., B.A.O., D.R.C.O.G., D.P.H., D.T.M. & H.
District Medical Officers of Health)  W. J. D. Cooper, M.B., B.Ch., B.A.O., D.P.H. A. T. Hunt, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. S. Knight, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H. W. A. Knox, M.B., B.Ch., B.A.O., D.P.H. T. O. P. D. Lawson, M.D., D.P.H., D.R.C.O.G.  Chest Physicians (part-time)		Margaret D. Cameron, M.B., Ch.B., D.P.H. Sheila M. E. Grew, M.R.C.S., L.R.C.P. M. J. Gryspeerdt, M.B., B.S., D.P.H. Catherine E. Hignell, M.R.C.S., L.R.C.P. Jean N. Moore, M.B., B.S. W. W. Ramsay, M.B., B.Ch., B.A.O., D.R.C.O.G., D.P.H.
R. A. Craig, M.D., M.R.C.P.  Principal Dental Officer J. F. A. Smyth, L.D.S.  Area Dental Officer J. P. B. Pengelly, L.D.S.  Orthodentists G. D. Everard, L.D.S.  Mrs J. M. Popplewell, L.D.S. (part-time)  Dental Officers D. N. de Gruyther, L.D.S.  W. M. Ellis, L.D.S.  D. G. Everard, L.D.S.  Miss M. S. MacKinnon, L.D.S.  Miss M. S. MacKinnon, L.D.S.  J. A. MacPhail  A. W. McCarthy, L.D.S.  Mrs D. W. Squires, L.D.S.  D. A. Thomas, L.D.S.  G. J. Tucker, L.D.S.  G. N. Willetts, L.D.S.		<ul> <li>W. J. D. Cooper, M.B., B.Ch., B.A.O., D.P.H.</li> <li>A. T. Hunt, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.</li> <li>S. Knight, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.</li> <li>W. A. Knox, M.B., B.Ch., B.A.O., D.P.H.</li> </ul>
Area Dental Officer J. P. B. Pengelly, L.D.S.  Orthodentists	Chest Physicians (part-time)	
Area Dental Officer J. P. B. Pengelly, L.D.S.  Orthodentists G. D. Everard, L.D.S. Mrs J. M. Popplewell, L.D.S. (part-time)  Dental Officers D. N. de Gruyther, L.D.S. W. M. Ellis, L.D.S. D. G. Evererd, L.D.S. A. J. Lane, L.D.S. Miss M. S. MacKinnon, L.D.S. J. A. MacPhail A. W. McCarthy, L.D.S. Mrs D. W. Squires, L.D.S. D. A. Thomas, L.D.S. G. J. Tucker, L.D.S. G. N. Willetts, L.D.S. 6 part-time officers	Principal Dental Officer	J. F. A. Smyth, L.D.S.
Mrs J. M. Popplewell, L.D.S. (part-time)  Dental Officers D. N. de Gruyther, L.D.S. W. M. Ellis, L.D.S. D. G. Everard, L.D.S. A. J. Lane, L.D.S. Miss M. S. MacKinnon, L.D.S. J. A. MacPhail A. W. McCarthy, L.D.S. Mrs D. W. Squires, L.D.S. D. A. Thomas, L.D.S. G. J. Tucker, L.D.S. G. N. Willetts, L.D.S. 6 part-time officers		J. P. B. Pengelly, L.D.S.
W. M. Ellis, L.D.S. D. G. Everard, L.D.S. A. J. Lane, L.D.S. Miss M. S. MacKinnon, L.D.S. J. A. MacPhail A. W. McCarthy, L.D.S. Mrs D. W. Squires, L.D.S. D. A. Thomas, L.D.S. G. J. Tucker, L.D.S. G. N. Willetts, L.D.S. 6 part-time officers	Orthodentists	
5 vacanoies	Dental Officers	W. M. Ellis, L.D.S.  D. G. Everard, L.D.S.  A. J. Lane, L.D.S.  Miss M. S. MacKinnon, L.D.S.  J. A. MacPhail  A. W. McCarthy, L.D.S.  Mrs D. W. Squires, L.D.S.  D. A. Thomas, L.D.S.  G. J. Tucker, L.D.S.  G. N. Willetts, L.D.S.

Dental Hygienist	Mrs W. E. Judd
Dental Health Education Officer	Miss M. D. Ryley
Superintendent Health Visitor	M' T II M Ownering
Deputy Superintendent Health Visitor	
*T 1.1 T7' '.	67 in number
	7 6' TO A 41.'
Health Visitor Tutor	Miss R. Atkinson
County Nursing Association:	A. E. D.
Secretary	3.61 3.6 A. D. J.
Superintendent	Min C M Allian
Assistant Superintendents	Miss A. E. Simpson
	164 District Nurse/Midwives
	9 part-time
Orthopaedic After-Care Sisters	Mica E M Hunton
Offitopactic fitter-date disters	Miss V. Leake
	Miss N. Long
	Mrs E. A. Stokes
Mental Health Home Teacher	Mrs E. M. Barnes
Mental Health and Duly Authorised Officers	D. S. Bayliss
	D. W. Parker
	A. E. Poyser
	G. H. Watts
Duly Authorised Officers	· ·
	F. L. Wintle
Assistant Duly Authorised Officers	R. T. Ireland
	B. F. Rice
Supervisors of Occupation Centres	5 in number
Assistant Supervisors of Occupation Centres	
Dental Attendants	
	13 part-time
County Public Health Officer	
Assistant County Public Health Officer	•
County Ambulance Officer	M TI II Deine
County Home Help Organiser	
Assistant Home Help Organisers	10 7 7 0 1
Secretary, County Association for the Blind	
Home Teachers for the Blind	AC TO DO Calleraldo
Welfare Officer for the Deaf	
Welfare Officer for the Physically Handicapped	Min T M Champant
Occupational Therapists	Miss S. M. Lyons
	Miss M. D. Warren
	Mrs P. Williams
Administrative Officer	W. T. Winstone
Senior Administrative Assistants	A. Hudson
COLLEGE LAWRENCEHULT V LAUDIOLUMICO	H. Paling
	F. B. Wilton

# SECTION A

# STATISTICS AND SOCIAL CONDITIONS OF THE COUNTY

	/*									
Ar	rea (in acres):—	•								
	Urban				• • •		• • •		24,179	
	Rural			• • •	• • •	• • •			749,131	
										773,310
Po	pulation :—									
	Registrar-Gener	al's Estima	te (Mid-ye	ear, 1959)	:					
	Urban	• • •	• • • •		• • •	• • •			159,500	
	Rural		• • •	• • •	• • •				313,000	29
										472,500
										C= 470 077
R	ateable Value (1			• • •	• • •	• • •	• • •	• • •	• • •	£5,413,051
	Sum represente	d by a peni	ny rate	• • •	• • •	• • •	• • •	• • •	• • •	£23,785
E	xtracts from Vit	al Statist	ics:—							
	Live Births—Le	egitimate							• • •	7,795
		egitimate			• • •	• • •	• • •			356
	111	ositimato	• • •		•••					
									Total	8,151
	Rate per 1,000	population	• • •	• • •	• • •	• • •	• • •	• • •	• • •	17.25
	Illegitimate live	_	cent of to	tal live bir	ths		• • •		• • •	4.37
	Still-births	• • •		• • •		• • •			• • •	163
	Rate per 1,000 1	total live ar	nd still-bir	ths		• • •	• • •			19.60
	Total live and s	till-births	• • •	• • •		• • •	• • •		• • •	8,314
	Infant deaths (d	leaths unde	er 1 year)	• • •		• • •			• • •	144
	Infant mortality		-							
	Total infan		er 1,000 to	tal live bir	ths	• • •	• • •		• • •	17.67
	Legitimate					oirths			• • •	17.70
	Illegitimate									16.85
	Neo-natal mort	ality rate (c	deaths und	er 4 weeks	s per 1,0	oo total li	ve births)			13.61
	Early Neo-natal	l mortality	rate (death	ns under I	week pe	r 1,000 to	otal live b	irth	s)	11.41
	Perinatal morta	lity rate (st	tillbirths a	nd deaths	under 1	week cor	nbined po	er I,	,000 total	
	live and sti		• • •		• • •	• • •	• • •		• • •	30.79
	Maternal morta	lity (includ	ling aborti	on)						
	Number of	deaths			• • •	• • •	• • •	• • •		6
	Rate per 1	,000 total li	ive and stil	ll births	• • •	• • •		• • •		0.72
	Deaths from:	_								
	· Cancer (all	ages)		• • •	• • •	• • •	• • •	• • •	• • •	788
	Measles (al	ll ages)	• • •		• • •	• • •	• • •		• • •	3
	Whooping	Cough (all	ages)		• • •	• • •	• • •	• • •	• • •	I
	Gastritis, e	enteritis an	d diarrhoea	a (all ages)	)		• • •	• • •	• • •	35

# 1. Live Birth Rate

The Birth Rate for the year 1959 was 17.25 per 1,000 of the population, as compared with 17.11 in 1958.

The following table shows the comparative figures for the past five years:—

	1955	1956	1957	1958	1959
Urban  Rural  Administrative County  England and Wales	15.61	16.03	16.72	16.99	17.47
	15.33	16.23	16.24	17.18	17.14
	15.42	16.17	16.40	17.11	17.25
	15.0	15.6	16.4	16.4	16.5

# 2. Death Rate

The Death Rate for the year was 10.70 per 1,000 of population as compared with a rate of 10.93 last year.

The total number of deaths in the County during 1959 was 5,055 and chief causes of death are shown in the following table.

•	Urban		Rural		Whole County		Percentage of total deaths		
	No.	Rate	No.	Rate	No.	Rate	Urban	Rural	Whole County
Heart Disease	651	4.08	1,151	3.68	1,802	3.81	36.30	35.29	35.64
Cancer	289	1.81	499	1.59	788	1.67	16.12	15.29	15.59
Vascular lesions of nervous system Other Circu-	249	1.56	492	1.57	741	1.57	13.89	15.08	14.66
latory Diseases	98	.61	134	.43	232	.49	5.46	4.11	4.59
Pneumonia	79	.49	148	.47	227	.48	4.41	4.54	4.49
Bronchitis	66	.41	128	.41	194	.41	3.68	3.92	3.84
Accidents	51	.32	130	.41	181	.38	2.84	3.98	3.58

# 3. Infantile Mortality

The Infant Mortality Rate for the County was 17.25. The rate for England and Wales for the same period was 22.0.

Year	Url	ba <b>n</b>	Ru	Rural		County	Rate for England and Wales	
1 car	No.	Rate	No.	Rate	No.	Rate	and wates	
1953	49	21	III	23	160	23	26	
1954	65	27	109	23	174	24	25	
1955	58	24	109	23	167	24	24	
1956	52	21	94	19	146	19	23	
1957	57	22	112	22	169	22	23	
1958	59	22	99	18	158	19	22	
1959	54	19	90	16	144	17	22	

# SECTION B GENERAL PROVISION OF HEALTH SERVICES FOR THE COUNTY

# 1. Laboratory Facilities

- (a) The arrangements for laboratory facilities for the undertaking of Public Health bacteriological and pathological work remain the same as for last year.
  - (b) REPORT OF E. G. WHITTLE, B.Sc., F.R.I.C., PUBLIC ANALYST

#### SUMMARY OF EXAMINATIONS

		March	June	September	December	Total
Milk	•••	209	181	186	174	750
Food and Drugs	• • •	147	140	126	123	536
Waters and Swimming Baths	•••	10	27	40	43	120
Fertilisers and Feeding Stuffs		18	18	19	18	73
Miscellaneous		12	54	22	10	98
Merchandise Marks Act					I	I
		396	420	393	369	1578
Spectrophotometric Analysis				16	8	24
Chlorination visit and inspections	• • •			10	I	II
Pharmacy and Poisons Act Atmospheric Pollution—	• • •	3	2	I	punkatapan	6
Lead peroxide		21	21	21	21	84
Deposit gauges	• • •	21	21	21	20	83
		45	44	69	50	208
Totals		441	464	462	419	1786

# Food and Drugs Act

# ADULTERATED SAMPLES

Serial No.	Article	Whether Formal	Nature of Adulteration or Irregularity
		or Informal	
A.2522	Milk	Informal	23.5% added water
A.2545	Milk	Formal	5.9% added water
B.2715	Milk	Informal	10.6% added water
B.2720	Milk	Informal	13.3% deficient in fat
B.2728	Milk	Formal	28.8% added water
B.2733	Milk	Informal	5% deficient in fat
B.2743	Milk	Informal	8.3% deficient in fat and abnormal N.F.S. at 8.35%
B.2758	Milk	Informal	6.6% deficient in fat
C.2748	Milk	Informal	10% deficient in fat
A.2597	Milk	Informal	5% deficient in fat
A.2598	Milk	Informal	6.6% deficient in fat
A.2600	Milk	Informal	10% deficient in fat
A.2601	Milk	Informal	10% deficient in fat
A.2602	Milk	Informal	5% deficient in fat
A.2605	Milk	Informal	25% deficient in fat
A.2606	Milk	Informal	13.3% deficient in fat
	(1	Bulk fat A.2604 to	A.2606 was 2.9%)
A.2618	Milk	Informal	Suspicious, S.N.F. 8.4% freezing point depression 0.529°C.
A.2620	Milk (Channel Island	) Informal	12.5% deficient in fat
A.2628	Milk	Informal	8.3% deficient in fat
	(I	Bulk fat A.2624 to	A.2631 was 3.26%)
A.2632	Milk	Informal	6.6% deficient in fat
A.2633	Milk	Informal	6.6% deficient in fat
A.2635	Milk	Informal	16.7% deficient in fat
A.2637	Milk	Informal	13.3% deficient in fat
	(H	Bulk fat A.2635 to	A.2638 was 3.15%)
A.2643	Milk	Informal	8.3% deficient in fat
A.2644	Milk	Informal	6.6% deficient in fat
A.2645	Milk	Informal	13.3% deficient in fat
A.2646	Milk	Informal	18.3% deficient in fat
A.2647	Milk	Informal	10% deficient in fat
A.2648	Milk	Informal	8.3% deficient in fat
	(F		A.2653 was 3.22%)
B.2817	Milk	Informal	20% deficient in fat

B.2823	Milk	Informal	10% deficient in fat
B.2851	Milk	Formal	18.3% deficient in fat
B.2852	Milk	Formal	11.6% deficient in fat
B.2853	Milk	Formal	11.6% deficient in fat
D -00-			B.2853 was 3.15%)
B.2887	Milk	Informal	6.6% deficient in fat
B.2890	Milk	Informal	6.6% deficient in fat
C.2781	Milk (Bu	Formal lk fat C.2774 to	10% deficient in fat C.2782 was 3.17%)
C.2811	Milk	Formal	20% deficient in fat
C.2862	Milk (Channel Island)	Informal	7.5% deficient in fat
B.2937	Milk	Informal	10% deficient in fat
C.2873	Milk	Informal	8.3% deficient in fat
C.2905	Milk	Formal	16.7% deficient in fat
A.2674	Milk (Channel Island)		20% deficient in fat 2675 was 4.25%)
۸ ۵6==	Milk (Channel Island)	·	12.5% deficient in fat
A.2677	•		A.2678 was 4.6%)
A.2763	Milk (Channel Island) (Bu		10% deficient in fat A.2766 was 4.3%)
A.2766	Milk (Bu	Informal lk fat A.2763 to	3.7% deficient in fat A.2766 was 4.3%)
A.2802	Milk (Bu	Informal alk fat A.2799 to	6.6% deficient in fat A.2802 was 3.3%)
A.2850	Milk (Bu	Informal alk fat A.2850 to	8.3% deficient in fat A.2852 was 3.2%)
B.3018	Milk	Formal	25% deficient in fat and abnormal solids-not-fat 8.05%
B.3021	Milk	Formal	6.5% added water
B.3027	Milk	Formal	3.5% added water
B.3028	Milk	Formal	8.2% added water
B.3068	Milk	Informal	11.7% deficient in fat and abnormal solids-not-fat 8.35%
A.2880	Milk (Channel Island) (Bu	Informal alk fat A.2879 to	10% deficient in fat A.2883 was 4.7%)
C.2738	Vinegar	Informal	A non-brewed condiment with not more than 5% malt vinegar
C.2920	Ice Cream	Informal	26% deficient in fat

	March	June	September	December	Total
Fat deficient	5	27	3	4	39
Added water	4	_	_	3	7
Abnormal solids-not-fat	38	5	13	21	77
Poor quality fat. Just less than 3%	_	9	I	ı	II
Suspicious. Low S.N.F. and freezing					
point depression less than 0.530°C	_	ı		I	2
Channel Island satisfactory	28	15	30	23	96
Channel Island unsatisfactory	_	2	4	ī	7
Channel Island, poor quality i.e. fat less				_	/
than 4%	_	Т			I
Channel Island (Abnormal S.N.F.)	quantité de	_	т		T
Total milks	209	181	186	174	750
Formal samples	42	65	43	52	750 202
M.M.B. contract	2	3	2		10
M.M.B. contract. Poor quality	_			3	10
MMR contract SME					
Anneal to covy	_	7	1		1
Appear to cow		/		II	18

Thus of 750 milks examined 77 were abnormal in respect of solids-not-fat, that is they gave figures below 8.5% but the freezing point depression did not indicate added water. Of the 96 \*examined 7 were deficient in fat, one was of poor quality and one abnormal in respect of solids-not-fat.

<sup>\*</sup> Channel Island milks.

OTHER FO	ODS AND DRUGS REQUIRE	NG COMMENT	
C.2698	Crabmeat	Informal	Alleged fragments of glass were in fact naturally occurring crystals of struvite
A.2588	Fish Paste, Salmon		
	and Anchovy	Informal	Poor quality. Only 65% of total fish
A.2663	Soft Drink	Informal	Foreign matter consisted of glass fragments weigh-
	(bottle with foreign b	oody)	ing approximately 50 milligrams
B.2799	Curry Powder	Informal	Sample was in a very mouldy state
C.2809	Foreign body in Bottle of Milk	Informal	Foreign body was a small black slug
C.2829	Dairy Ice Cream	Informal	Contained 5.9% total fat of which half was milk fat
C.2835	Dairy Ice Cream	Informal	Contained 11.6% total fat of which not more than 0.5% was milk fat
A.2671	Foreign body in Bread	Informal	The foreign body was a wire nail
A.2757	Lamb Chops (Frozen Food)	Informal	This sample was submitted at the end of a test period of weighing. As received it was unfit for human consumption
C.2938	Scampi	Informal	
C.2943	Fillets of Smoked Haddock	Informal	Chemically and Bacteriologically satisfactory
C.2944	Small Plaice Fillets	Informal	

C.2950	Bread and Cheese Roll with foreign body	Informal	The foreign body was a one inch portion of a match stick with the burnt end visible
A.2783	Flour of Cooked Chestnuts	Informal	This sample showed evidence of insect infestation identified as the larva of the Ephestia moth, probably E.kuchniella Regarded as unfit for human consumption
A.2832	Wire in Sweet	Informal	The foreign body was identified as a stout piece of wire approximately $\frac{1}{4}$ in. long and $\frac{1}{16}$ in. diameter. It may have been derived from a wire cooling rack
C.2997	Ice Cream	Formal	Satisfactory

# 2. National Health Service Act, 1946

# (I) HEALTH CENTRE

The work at the Hester's Way Health Centre, Cheltenham, has proceeded smoothly during the year, and the following is a summary of the attendances made under the various services.

General	Treatment		Ante	
Practitioner	and	Child	& Post	
Consultations	Casualties	Welfare	Natal	Total
15,424	2,935	4,237	1,209	23,805

# (II) CARE OF MOTHERS

#### (a) Expectant and Nursing Mothers

The report of the Maternity Services Committee under the chairmanship of Lord Cranbrook was published in 1959 and caused all those concerned with the Midwifery Services to re-examine their existing arrangements. The Committee considered the whole content of the Maternity Services and received evidence from all interested parties including representatives of the Local Health Authorities. Particular references include the content of a Maternity Service place of confinement, the work of midwives, the local Health Authority Maternity Services, the present tripartite administration and co-ordinating arrangements.

It is satisfactory to note that the services already provided in Gloucestershire are similar to those recommended by the Committee.

The committee recommend that the local health authority is the appropriate authority to determine whether social reasons make a home confinement undesirable and that they should always be consulted by the hospital authorities before a decision is made to book a patient solely on social grounds. In North Gloucestershire the Local Health Authority acts as the booking agent for the Regional Hospital Board for all social cases. Further recommendations stated that the hospital maternity services should be expanded so that sufficient maternity beds be provided for 70% of all confinements. In addition the hospitals should provide ante-natal beds for 20% to 25% of all confinements in their area. There have been discussions with the Regional Hospital Boards and Management Committees' representatives and general practitioners and obstetricians regarding these provisions, and it is noticeable that in 1959 65.4% of all confinements in the County took place in hospital, an increase of 4.3% on the previous year.

Suggestions that some midwives might undertake work both in hospital and on the district do not apply in this area, where the majority of the nursing staff employed are combined district nurse/midwives.

Regarding the services provided by the Local Health Authority, the committee recommends the practice already started in this County, whereby general practitioner obstetricians carry out ante-natal work in the Local Health Authority ante-natal clinics and that an appointment system should be operated.

Health Education, Mothercraft and Relaxation classes were carried out in twenty-six centres in the County during the year. Accommodation in hired premises being used where no fixed clinic is available. In addition mothers can attend hospital classes in Bristol at Southmead Hospital, Cheltenham Maternity Hospital, Gloucester City Maternity Hospital, Stroud, Berkeley and Cirencester. At the Soundwell and Filton Clinics very successful evening meetings are held, to which husbands are invited to see a film show and hear one of the doctors talk about being a father.

The Cranbrook Committee see no reason at the present time for altering the tripartite structure of the Maternity Service. It is, in fact, similar to other services provided for the patient and the hospitals, general practitioner and Local Health Authorities all have a part to play. Good liaison between the three is, however, essential and the use of a personal maternity card is recommended. This was already in use in Gloucestershire and is proving to be increasingly useful.

Two new ante-natal clinics have been started by the midwives during the year, one at Barnwood and the other in the new clinic at Circnester. The number of new cases attending the ante-natal clinics was 1,257 and the total number of attendances was 7,238.

# (b) Arrangements for Confinement

The number of birth notifications in Gloucestershire reached the record figure of 8,335 in 1959, an increase of 215 over the previous year. The number of births taking place at home fell by 121 and numbered 2,884, and 5,451 births took place in hospitals, that is 65.4% of the total births and an increase of 4.4% over 1958. Two thousand, five hundred and one applications for hospital confinement were received and investigated during the year, an increase of 31, and in 312 cases (12.5%) admission to hospital was not considered necessary on social grounds.

An increased number of requests for investigation of home conditions is being received directly from the hospitals, particularly those in the Bristol area. In many instances medical reasons make it advisable for a patient to be delivered in hospital, but provided her home conditions are satisfactory it is possible for her to be discharged to the care of her general practitioner and the domiciliary midwife before the fourteenth day. In these instances the patient's co-operation is always sought and the services of a home help are made available to her.

# (c) Care of the Mother and Illegitimate Child

A small reduction in the number of illegitimate births in the County was noted in 1959, 364 (4.4%) compared with 383 (4.7%) the previous year, and the percentage in Cheltenham fell from 9.8% in 1958 to 6.5% in 1959.

The Gloucester and Bristol Diocesan Associations for Moral Welfare act as the County Council's agents in this work, and the following details are given by the Organisers of the Associations:—

# Number of new County cases dealt with:

Gloucester Diocese (excluding Cheltenham Deanery)	• • •		149
Cheltenham Deanery	• • •	• • •	104
Parts of the County within the Bristol Diocese	• • •	•••	31
			284

The Cheltenham Deanery Worker, Miss H. L. S. Morrice has reported that 15 of the mothers in her Deanery were married women.

In the Gloucester Diocese (including Gloucester City) the ages of the mothers were :-

			• • •	• • •	32	
	• • •		• • •	• • •	129	
			• • •	• • •	57	
• • •	• • •	• • •		• • •	67	
• • •	• • •	• • •	• • •	• • •	10	~
				Total	295	,
	•••					129 57 67 10

# St Catherine's Home, Cheltenham

This home has been fully occupied throughout the year, the shelter bed often being used to accommodate Local Health Authority cases. Sixty-nine unmarried mothers and babies were admitted. Fiftythree were County cases and 14 were shelter cases. The average length of stay was 313 days before and  $31\frac{1}{2}$  days after confinement.

# (III) CARE OF CHILDREN

# (a) Home Visiting

Summary of hor	ne visits during t	ne year :				
	Number of	Childre	n under	Children	Children	Total
	Children	ıу	ear	I - 2	2 - 5	Visits
	under 5	First	Total			
	Visited	Visit	Visits			
L.H.A.	29,500	6,626	51,574	22,206	46,787	120,567
Vol. Org.	5,588	1,065	10,144	4,739	8,197	23,080
						143,647

For each child under the age of I year who was first visited in 1959, 6 subsequent visits were paid, giving an average of seven visits in the first year of life.

An increase of 6,181 visits were paid to all children under the age of 5 during the year.

#### (b) Child Welfare Centres

Two new centres served by the mobile clinics were started during the year at Avening and Hempsted. As no suitable waiting room is available at the latter centre, the mothers attend by appointment. This system has proved very satisfactory, and resulting from the experiment appointment systems are being started in other clinics. The mobile clinics attend 56 centres a month, which involves a great deal of travelling in all weathers and allows little time for maintenance. Due to the interest of the drivers and the health visitors, however, they are maintained in an immaculate condition and did not fail a single centre in the past year.

There are now 101 static voluntary welfare centres, and it is a pleasure to record the continued cooperation by the ladies of the voluntary Child Welfare Centre Committees. The centres at Cam and Dursley combined when the new County clinic opened at Dursley, and the centre at Cirencester is now held in the new clinic.

		1959	1958
Number of sessions per month	• • •	351	343
No. of children who first attended under age of 1 year		6,281	5,913
Total number of children who attended		18,551	18,072
Total number of attendances:—			,
Under 1 year	• • •	62,929	61,072
Over I year and under 2 years	• • •	21,776	21,285
Over 2 years and under 5 years	• • •	28,302	30,233

Seventy-six per cent of children under the age of I year attend a child welfare centre and averaged about 10 attendances during that year. Unfortunately attendances decline in the I to 5 year age group as the following table shows:—

Percentage of children who attended a welfare centre and were born in:

		Live Births	
1959	5,405 attended	8,177	62.1%
1958	5,005 attended	7,964	62.8%
1957-54	8,141 attended	28,881	28.1%

These figures are based on the number of live births in the County for the year in question.

As approximately 15% of children attending school are reported as requiring treatment on entry, which in many cases could have been cured or prevented from developing by adequate supervision in the pre-school period, the need for extra attendances at the child welfare centres cannot be too strongly emphasised. Toddlers can be seen at all welfare centres.

#### Mothers' Clubs

Eleven Mothers' Clubs operate throughout the County and all report a successful year's work.

### (c) Distribution of Welfare Foods

The help given by the volunteers whether in the Child Welfare Centres or their own houses or business premises is very much appreciated. Greater care is now being paid to the expiry date of the life of the Dried Milk and to the handling of the bottled products and the co-operation of the voluntary personnel in this respect has been very good.

In the figures below will be noticed the continued fall in the take-up of National Dried Milk which has gone on since the increase in price in April, 1957.

Welfare foods were available at 231 places in the County, i.e. 162 Child Welfare Centres (fixed and mobile), 40 shops, 25 houses and 20 part-time offices with paid assistance.

The quantities of welfare foods distributed:—

National Dried Milk	Cod Liver Oil	Orange Juice	Vitamins A & D Tablets
(Tins)	(Bottles)	(Bottles)	(Packets)
101,869	30,181	261,003	23,833
(119,827)	(30,021)	(251,688)	(21,066)

The 1958 figures are shown within brackets.

# (d) Day Nurseries

The Day Nursery at Stroud was closed in July, 1959. In spite of places being offered to non-priority cases for payment of fees, numbers continued to decrease. The Nursery had made a valuable contribution to the welfare of the local children and in the training of Nursery Nurses.

Three Day Nurseries are maintained.

The numbers attending the two Nurseries in Cheltenham remained high throughout the year, but not so high at Kingswood.

Total number of nursery places	under 2	37
	2 ~ 5	68
Numbers on Register at December 31st, 1959	under 2	33
	2 - 5	88
Average daily attendances during year	under 2	29
	2 - 5	67

# Training of Nursery Students

Out of 37 applicants, 19 students were accepted for training. Of the students who finished their training during the year, 16 were successful in their National Nursery Examination Board examination.

# (IV) RECUPERATIVE HOLIDAY HOMES

Twenty mothers went away for holiday home care and were accompanied by 47 children.

# (V) PROBLEM FAMILIES

Twenty-one new cases were considered by the Officers' Co-ordinating Committee, as well as 25 families who were already under supervision. These families represent only a small proportion of the difficult families that the health visitors are continually dealing with, and it is due to their efforts that more cases do not come before the Co-ordinating Committee.

The families are helped in a variety of ways. The Divisional Medical Officers of Health hold local Co-ordinating Committee meetings and call on a representative of the local housing authority, the N.S.P.C.C., the Mental Health Officer, the specialised worker from the Children's Department, the local Child Care Officer, the general practitioner or the health visitor as required. Monetary assistance to help the children in particular can be obtained from the Free Hospital Trust Fund and, where necessary, mothers accompanied by young children can be sent away to special Homes for housecraft training.

# (VI) NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

There are fifteen registered child minders who can offer places to 62 children. No application for daily minders fees have been received. There are no private day nurseries registered in the County.

# (VII) INFANT DEATHS

The following table shows the Infant Mortality Rate for the past five years.

					England & Wales	County	Cheltenham
1955			• • •		24.9	24.I	30.22
1956		• • •			23.8	19.8	28.64
1957			• • •		23.0	22.3	27.27
1958				• • •	22.5	19.8	20.81
1959	• • •			• • •	22.0	17.7	19.43

A substantial decrease in the infant mortality rate is noted for the second year in the County and for the first time the figure for Cheltenham is below 20.

The number of infants dying under the age of I year is now further sub-divided into those dying in the first week of life, those dying between seven and twenty-eight days, and those dying between the age of I month and I year.

The peri-natal death rate is defined as the number of stillbirths and infant deaths under the age of seven days per 1,000 live births. The peri-natal death rate is influenced by a number of factors; the health of the mother during pregnancy, the type of labour, the weight of the infant, the age of the mother, and the number of her previous confinements. The death rate in this group is only falling very slowly and particular attention is being paid to improving this state of affairs.

Death in the neo-natal period, 7 to 28 days, bears less relationship to maternal health and obstetrical events and the majority of these deaths are found to be due to inoperable congenital defects and less commonly to sepsis.

Deaths from the age of 1 month to 1 year bear little or no relation to obstetrical events, but are related to general environmental conditions, and the standard of mothercraft.

There were 33 deaths between the age of 1 month and 1 year, 13 less than in 1958.

	Place of	Death
	Home	Hospital
Broncho-pneumonia	_	2
Broncho-pneumonia plus other conditions	I	5
Bronchitis	4	_
Asphyxia	I	_
Congenital Heart Disease	_	3
Congenital Deformities	2	8
Gastro-enteritis	_	3
Road accident	_	I
Other conditions	I	2

It is worthy of note that a road accident caused one death in this age group.

# Neo-Natal Deaths

There were 111 deaths during the first 28 days of life, 93 deaths during 0-6 days and 18 between 7 and 28 days.

				o-6 days	7-28 days	Total
Prematurity—				_	•	
where this is give		35	I	36		
associated with	atelec	II	I	12		
associated with	other	10	2	12		
Congenital Defects	• • •	• • •	• • •	II	14	25
Cerebral Haemorrha	ge	• • •	• • •	9	consumo	9
Atelectasis	• • •	• • •		8	40000000	8
Infections	• • •	• • •	• • •	2		2
Asphyxia	• • •	• • •	• • •	I	****	Ī
Haemolytic Disease	• • •			2		2
Other			• • •	4	***********	4
				competition	****	
				93	18	III
				********	and a second	

The Registrar General is requiring information regarding the peri-natal death rate for the first time this year. The figures for the County are given below and the reduction in the rate in the past 2 years will be noted.

1956	• • •	• • •		• • •	34.38
1957	• • •	• • •	• • •		35.27
1958	• • •	• • •	• • •	• • •	32.71
1959		• • •	• • •		30.81

#### Premature Babies

A small increase in the percentage of premature births was noted during the year, 6.5% as against 6.1% the previous year. Five hundred and forty-four premature births took place during the year.

Of the 436 cases born in hospital, 55 died in the neo-natal period.

Domiciliary Premature Births numbered 105. Of these, 82 were nursed at home, 2 died within 24 hours and 80 survived for 28 days. Twenty-three children were transferred to hospital—6 died before the 28th day and 17 survived beyond that time.

Arrangements for the care of premature babies include the provision of 6 special travelling outfits for the transport of such babies to hospital, and domiciliary loan equipment where the baby is to be nursed in the home. Two Midwives have received special training in the care of premature babies.

# Illegitimate Infant Deaths

Six cases were notified and all died before the age of 1 month. The illegitimate infant mortality rate is 16.9 compared with 18.66 in 1958.

# Still Births

A reduction in the still birth rate from 20.23 to 18.97 was seen during the year. The number of still births, 158, being only 2 more than the previous year in spite of the rise of 215 in the birth notifications. 136 of these births took place in institutions and 22 at home. Of the 88 premature still births 75 were born in institutions, one in a nursing home and 11 at home.

# (VIII) MIDWIFERY AND HOME NURSING

During the year the housing of Nursing Staff was considerably easier. At the end of the year 72 houses and 18 flats were available, 40 houses and 1 flat being furnished by the County Council. A pair of flats was completed at Minchinhampton and the building of a further pair commenced at Westbury-on-Severn. 39 Nurses were providing their own accommodation.

Staffing problems continued and at the end of the year there were vacancies for three District Nurse/Midwife/Health Visitors and two District Nurse/Midwives (Area Reliefs). The position was aggravated by extensive off duty periods through sickness.

Because of the tendency to obtain private cars a reduction of four in the Car Fleet became possible and a further reduction is envisaged. The standard of the driving of Fleet Car users has improved considerably during the last three years with a corresponding fall in the frequency and severity of accidents.

There are 88 District Nursing Associations affiliated to the County Nursing Association.

Nursing Staff—173 (164 whole time, 9 part time).

Twelve Midwives attended Parentcraft, Group Teaching and Relaxation Courses. Twenty-three Midwives attended Midwifery Refresher Courses. Six Nurses attended General Nursing Refresher Courses. Four Nurses attended Health Visitor Refresher Courses.

The Gloucester City and County 37th Annual Refresher Course for Nurses, Midwives and Health Visitors was held in April.

Five Nurses completed Queen's District Training. Pupil Midwives from the Querns, Circnester and Mortimer House, Bristol, received Domiciliary Part II. Midwifery Training with approved District Teaching Midwives in the County.

# Record of Nurses' Work

Record by Ivarses W	// <i>I</i> V					
	Cases Brought	Forward		• • •	• • •	2,357
New Cases	D 1: ' (D					
	Deliveries (Dr		nt)	• • •	• • •	2,450
	Deliveries (Dr	_		• • •		404
	Early discharge	es from ho	spital	• • •	• • •	1,528
	Miscarriages	• • •	• • • •	• • •	• • •	223
	General Medic		• • • •	• • •	• • •	7,910
	General Surgion		• • • •	• • •	• • •	1,989
	Infectious Dise	eases			• • •	42
	Maternal Com	plications	• • •	• • •	• • •	29
	Tuberculosis	• • •		• • •	• • •	35
	Miscellaneous	• • •	• •••	• • •		1,947
						16,557
						-
Visits Paid						
v istis 1 utu	Deliveries (Dr	not nrecen	·+)			40 005
		-	·	• • •	• • •	48,835
	Deliveries (Dr		•••	• • •	• • •	7,812
	Ante-natal—H			• • •	• • •	27,417
	Ante-natal—H	-	_		• • •	8,132
	Early discharge		spital	• • •	* * *	9,894
	Miscarriages		• • •	• • •	• • •	1,479
	Maternal Com			• • •	• • •	122
	General—Med		• • • •			242,968
	General—Surg		• • • •	• • •		40,645
	Infectious Dise	eases	• • •			232
	<b>Tuberculosis</b>	• • • • • • •				2,429
	Miscellaneous	• • • • • • • • • • • • • • • • • • • •	• • •		• • •	11,503
*	Ineffective	• • • • • • •				3,578
						5.57
Clinic Sessions						
	Ante-natal	• • • • • • •		• • •		2,471
	Post-natal	• • • • • • •	• • •	• • •		149
	Child Welfare	• • • • • • • •	• • •	• • •	• • •	814
						<del></del>
						3,434
Public Health						
	Visits	• • • • • • • •	• • •	• • •	• • •	28,407
	Sessions	•••	• • •	• • •	• • •	1,969
	Total visit	s		• • •		433,455
	Total Sess	ions			• • •	5,403
	Night Call					2,167
	3					_,,

An increasing number of mothers are being discharged from hospital after confinement before the fourteenth day of the puerperium. Therefore, according to the Rules of the Central Midwives Board, she must be visited at least daily by a midwife. One thousand, five hundred and twenty-eight mothers were discharged early in 1959, 358 more than in the previous year, and received 9,894 visits. Nursing such patients is difficult and time consuming and lacks the completeness that is apparent when the midwife has delivered the patient. When an early discharge is planned the midwife visits the home in the ante-natal period to introduce herself and give advice to the mother. In this way the closest continuity is maintained. An increase of 406 ante-natal visits were made during the year.

A satisfactory trend noted in the work of the midwifery and home nursing service is the fall in the number of new medical and surgical cases and a reduction in the total number of visits paid during the year by the nurses. The fall in new cases indicates a general improvement in health. The fall in the number of visits, however, while reflecting the decrease in new patients, also points to improved methods of treatment. Injections which were required three or four times a day can now be given in a simple daily dose, and improved methods of sedation sometimes obviated the need for a night call. High quality nursing care, however, must still be carried out.

The district nurse/midwife now takes a much greater part in preventive medicine, and the number of ante-natal, post-natal and child welfare clinic sessions attended has risen from 2,786 in 1958 to 3,434 in 1959.

# Report of the work of the Local Supervising Authority

During the year 229 certified midwives notified their intention to practice as midwives, and nine as maternity nurses. At the end of the year 219 midwives were practising in the Authority's area and 133 of these were employed by voluntary bodies. Eighty-two were employed by Hospital Management Committees, two in private domiciliary practice and two in private nursing homes.

#### I. Deliveries attended by Midwives

	Domiciliary	Institutional	Total
Employed by voluntary organisations Employed by Hospital Management	2,854		2,854
Committees		3,758	3,758
In private practice	4	63	67
	2,858	3,821	6,679

# 2. Medical Aid under Section 14(1) of the Midwives Act, 1951

#### (1) Domiciliary

	(a)	Where	the n	nedical	practi	tioner	had und	lertaken	to		
		provide	mate	rnity se	rvice	• • • • •	• • •	• • •	• • •	992	
	(b)	Others	• • •	• • •		• • •	• • •	•••	• • •	38	
(2)	Case	es in Inst	itution	ıs		•••	•••	•••	• • •	169	1,030
											1,199

# 3. Inhalational Analgesia

	nber of midwives qual Igesia :	lified to	admin	ister i	nhal	ational		
	In hospitals	• • •	• • •	• • •	• • •	• • •	82	
(b)	In private homes					• • •	2	
(-)	T 1 131							84
(c)	In domiciliary practice							
	(i) employed by Distr		_		ons	• • •	133	
	(ii) in private practice	• • •	• • •	• • •	• • •	• • •	I	
	1 0 0							134
	nber of sets of apparatu					ctice:		
(a)	Gas and Air	• • •	• • •	• • •	• • •	• • •	132	
	Trilene						19	
	nber of cases in which in		_		s adı	minis-		
tere	d by midwives in domi	ciliary p	practice	:				
						Gas and		
						Air	Trilene	Total
	When doctor not preso		-		• • •	1,556	627	2,183
(b)	When doctor present a	at delive	ery	•••	• • •	238	130	368
							***************************************	
						1,794	757	2,551

#### Pethedine

This drug was used by midwives in 1,232 cases, 30 more than last year.

### Maternal Deaths

There were six deaths during the year associated with pregnancy or confinement, but in one case the actual cause of death was due to Tuberculous Meningitis.

# (IX) DENTAL TREATMENT OF EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN Report of the Principal Dental Officer

Staff

On December 31st the staff had increased to 13 whole-time and 6 part-time officers, giving a whole-time equivalent of 14.6, compared with 13.6 on 31.12.58 and 15.25 on 31.12.57. Staff changes during the year, however, reduced the average staffing level to the equivalent of little more than 13 dental officers.

Of the total number of sessions worked (5,858) the equivalent of 387 (7%) was spent on the treatment of expectant and nursing mothers and young children. This figure represents a 1% drop compared with the proportion in 1958, and is 3% less than the Ministry's recommendation. It is interesting to note that 48% of the pre-school children and 50% of the mothers treated were in the Gloucester, Stroud and Cirencester areas alone, or from one-quarter of the County. No information is available to indicate whether more mothers and young children have received treatment from general practitioners to compensate for the smaller numbers treated by the County. The numbers treated rose steadily up to 1955, but have fallen equally steadily since then—pre-school children by 29% and mothers (including those referred to general practitioners) by 27%. The staffing level has fluctuated since 1955, but has on balance fallen little. More facilities are available for treatment in the way of fixed clinics, and (although more time is thus available for the needs of school children) it is particularly disappointing to note the diminution of the service given to pre-school children.

# Treatment of Expectant and Nursing Mothers

Fixed clinics are now available in all main centres of population in the County, but, as was anticipated last year, the lack of transport facilities in the north-east has made it impossible for many mothers to attend at Moreton-in-Marsh clinic, their public transport being mainly to towns in Oxfordshire and Worcestershire. In such cases mothers were again issued with forms to take to their own dentists, who treated them on behalf of the County. A similar arrangement was continued in the Dursley area before the new clinic was opened. Forms were issued to 89 patients, treatment being completed for 70 during the year, including a number who were referred in 1958. The following table gives the average treatment carried out for mothers during the last five years. It will be noted that there is a slight tendency for fillings to rise and extractions and dentures to fall. All scalings were carried out by the hygienist.

Treatment per 100 mothers:

, , , ,	 •				200
Year			Fillings	Extractions	Dentures
1955	 n + +	• • •	160	331	64
1956	 		143	399	58
1957	 		187	455	67
1958	 	• • •	160	383	66
1959	 	• • •	171	329	60

# Treatment of pre-school children

As mentioned previously, the numbers treated again showed a decline. The amount of work carried out for each child has continued to increase, as illustrated in the table below. One boy aged  $4\frac{1}{2}$  yrs. was seen with all his teeth decayed to gum level, and in a sceptic condition. He was immediately referred to hospital for the extraction of all teeth, and subsequently fitted with full dentures. This received the attention of the local press, who featured it as a triumph of National Health dentistry. Although only one child required total extractions, many multiple extractions had to be carried out, and these cases must properly be regarded as indications of the failure rather than the triumph of a service which ought to be preventive. Although fillings per 100 children reached their highest level last year, they were greatly exceeded by the extractions, which also show the highest total yet recorded.

# Treatment per 100 children

			Sliver Mitrate					
Year			Fillings	Treatment	Extractions			
1955	• • •		 63	25	152			
1956			 72	33	167			
1957			 63	34	169			
1958		• • •	 70	30	184			
1959			 81	20	187			

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# General anaesthetics

As far as possible medical anaesthetists were employed, in accordance with the Ministry's recommendation. In Cheltenham Borough anaesthetics were given by medical officers at the equivalent of 9 sessions. Elsewhere specialist or general practitioner anaesthetists were engaged as required on a sessional basis, the equivalent of 22 sessions being spent on maternal and child welfare work. Dental officers gave anaesthetics for the equivalent of 8 sessions. Extra dental attendants were engaged on a sessional basis to assist in recovery rooms when medical anaesthetists were employed.

# Dental laboratory

During the year an apprentice was taken on. In addition to dentures for mothers, all mechanical work for the school dental service, school children in Gloucester City and the hospital dental staff of the North Gloucestershire Clinical Area, was carried out in the County laboratory. The totals are given in Table C.

# A. Numbers provided with Dental Care

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing  Mothers	418	411	389	279
Children under five	695	638	616	539

# B. Forms of Dental Treatment provided

	Scalings and Gum Treatment	Fillings	Silver Nitrate	Crowns or Inlays	Extrac- tions	General Anaes- thetics	Dentures Full	provided Partial	X-rays
Expectant and Nursing Mothers	231	664		I	1281	183	119	115	29
Children under five	10	499	120		1150	432	2		

# C. Work of the Dental Laboratory

	Ortho- dontic Appliances	Dentures	Repairs and Relines	Crowns and Inlays	Study Models	Other Mechanical Operations	Total No. of Operations
M. & C.W.		236	16	I	45000	19	272
Total work (inc. M. & C.W. School and R.H.B.)	566	580	118	14	1189	63	2530

# Dental Health Education

The steadily increasing effort to interest the public in the prevention of dental disease was further forwarded by the appointment in September of Miss M. D. Ryley as dental health education officer. Such an appointment is, so far as is known, without precedent, and underlines the importance attached by the authority to prevention. The intrinsic desirability of preventing or lowering the incidence of dental decay is made the more urgent by the shortage of dentists to treat defects.

It is well recognised that by far the greatest single cause of decay is the continual eating of sweet and sticky substances throughout the day. Since it is normally impossible to use a toothbrush or rinse the mouth except after meals, these practices, useful as they are, will have little effect if the habit of eating sweets, biscuits, etc. between meals continues. If dental health education is to have any real effect on reducing decay, it must, therefore, necessarily concentrate first and foremost on limiting to meal-times the eating of sweet and sticky foods. The knowledge that the "sweets between meals" habit is the major cause of tooth decay is spreading slowly but surely in the County, and evidence accumulates that parents are alive to the dangers. Health education can never be judged by its apparent short-term results (or lack of results) since its effectiveness is cumulative.

Since the sweet-eating habit is formed early in life, the educational work of Mrs Judd, the dental hygienist, was again concentrated on the mothers of young children, and she visited 48 welfare centres, and one mothers' club.

A dental health exhibition was given in Cheltenham in connection with "Safety Week." Interest in the work of the authority on prevention is widespread. At a demonstration on the work of the local authority dental services at the Clinical Conference of the British Dental Association, it was possible to devote half of a large stand to preventive services. Later in the year, the General Dental Council requested a demonstration of our work, and this was attended by the Dental Health Committee of the British Dental Association and the Public Relations Branch of the Ministry. Exhibitions and demonstrations play a valuable part in the promotion of public interest, but the continuous education carried out by health visitors and the hygienist to individual mothers is probably the most effective means of promoting dental health.

Until the fluoridation of water supplies is accomplished (involving at the present time a steady educational campaign for public acceptance) the only hope of promoting dental health in the community lies in persuading mothers of young children, and the children themselves, that the continual sweet-eating habit leads to decayed teeth with all their attendant discomforts and disabilities, and that naturally sound and healthy teeth are really worth having.

#### (X) HEALTH VISITING

Recruitment has been satisfactory and in addition to those trained in the county, health visitors with experience in other areas continue to apply for vacancies. The publication earlier in the year of the proposals in the Mental Health Bill has meant reconsideration of the need for increasing knowledge of mental illnesses and of the implications of community care of the mentally sick. The staff have been fortunate in having available lecturers aware of their needs and prepared to help. Some courses of training have already taken place and others are planned for next year. These are in addition to the post graduate courses arranged by the various professional bodies and attended by a proportion of the staff each year. These with the opportunities they offer, are much appreciated.

Home Visits:  Health Visitors  District Nurse, Midwife/Health Visitors	133,449 26,569	1958 (125,152) (28,171)
Attendances at Child Welfare Centres  Health Visitors	4,182	(4331)
District Nurse, Midwife/Health Visitors	774	(757)

# Health Visitors' Training Course

Eleven students, accepted for training under the Council's training scheme, completed the Health Visitors' Training Course in June and successfully passed the examination of the Royal Society for the Promotion of Health. Nine of these students were subsequently employed in the County; five were appointed as full-time Health Visitors and four were appointed to carry out combined duties of District Nurse/Midwife/Health Visitor. The other two students came from Pakistan; one returned to Pakistan to carry out public health work and the other undertook further midwifery training in this country.

Two Turkish students, sponsored by the World Health Organisation, completed a shortened course of training in May. Their course was organised to provide a basic training in practical public health work so that they could help further the development of public health nursing services in Turkey.

Eleven students who were sponsored by the Council to take the present course commenced their training on 2nd September.

# (XI) VACCINATION AND DIPHTHERIA IMMUNISATION

# (a) Vaccination against Smallpox

Vaccination	Under 1 year	I year	2 - 4 years	5 - 14 years	15 years and over	Total
Primary Re-vaccination	3,780	180	142	174	274	4,550
	5	3	32	74	408	522

There was an increase of 934 in primary vaccinations and an increase of 96 in re-vaccination compared with 1958.

# (b) Whooping Cough Vaccination

The scheme for vaccination against whooping cough which commenced in June, 1955, developed and 7,190 children were protected compared with 4,771 in 1958.

A suspended whooping cough vaccine is supplied and in view of the danger of the disease in early life vaccination is recommended before the age of six months. Immunisation against diphtheria can then be done soon after this age.

The following table gives details of the numbers of children for whom records were received. The total number of children receiving combined prophylaxis, by general practitioners, which is also included in the statistics for diphtheria immunisation in sub-paragraph (d) below, shows an increase of 1,977 on 1958.

Age at 31.12.59 i.e., Born in Year	Under 1 1959	1 year 1958	2 - 4 1957-5	5 - 14 1954-5	Under 15 Total
<ul><li>(i) Whooping Cough Vaccination</li><li>(ii) Combined Diphtheria/Whooping Cough Prophylaxis (obtained by and</li></ul>	2,666	320	124	40	3,150
given by General Practitioners)	3,162	621	182	75	4,040
No. of Re-inforcing Injections		I	169	255	425

#### (c) B.C.G. Vaccination

The procedure described in the Annual Reports for the years 1955 and 1958 has continued. The table below gives details of the results during the last three years. The "grand total" refers to all children who have been tested since the scheme was extended to 13-year olds in October, 1954.

The acceptance rate of 65.9% could very well be improved, particularly because of the valuable protection afforded at a time when children will be leaving school and thus be exposed to the risk of infection with pulmonary tuberculosis. During the year the scheme was extended to include 12-year old children in classes of 13-year olds, and also older children whose parents now wished to take advantage of the offer of B.C.G. vaccination.

We continued to participate in the Oxford Regional Hospital Board's survey of B.C.G.

		1957			1958					
	County	Chelt- enham	Whole County	County	Chelt- enham	Whole County	County	Chelt- enham	Whole County	Grand Total
No. of schools conc'n'd Invited Accept'd Tub'c'lin tested Positive Negative Percent. positive	3,709 699	10 962 375 368 59 309 16.0%	71 6,946 4,246 4,077 758 3,319 18.6%	30 3,508 2,399 2,210 398 1,812 18.0%	10 954 561 515 76 439 14.5%	40 4,462 2,960 2,725 474 2,251 17.4%	50 6,880 4,533 4,671 677 3,994 14.5%	11 1,052 634 537 56 481 10.4%	61 7,932 5,167 5,208 733 4,475 14.1%	70 28,892 17,924 16,987 3,105 13,882 18.2%
Not vac'nated Vac'n'ted		309	26 3,293	8 1,804	439	8 2,243	16 3,978	481	16 4,459	82

We have continued to participate in the Oxford Regional Hospital Board's survey of B.C.G.

# (d) Diphtheria Immunisation

The following table gives the number of children at the end of the year who had completed a course of immunisation:—

minumsation .—			1		
Age on 31.12.59 (i.e. Born in Year)	Under 1 1959	1 - 4 1955-58	5 - 9 1950-54	10 - 14 1945-49	Under 15 Total
A. Number of children whose last course (primary or booster) was completed in the period 1955-59	691	19,772	18,914	11,874	51,251
B. Number of children whose last course primary or booster) was completed in the period 1954 or earlier			11,441	17,165	28,606
C. Estimated mid-year child population	7,910	29,490	76	,600	114,000
Immunity Index 100 A/C	8.7	67.0		40.1	44.9
Number of children who received complete course during year	6,220	2,103	I	,294	9,617
No. of reinforcing injections		1,003	II	,231	12,234
			• 1 1 1	-1	o torget of 2

The immunity index of children under one year is 8.7 which is considerably short of the target of 25 for these children. Reinforcing injections for school children showed an increase of 5,581 to 11,231.

# (e) Poliomyelitis Vaccination

On the 1st January, 2,522 children and adults were awaiting injections and 1,839 required second injections. During the year 48,664 persons completed the initial course of two injections, 68,108 received a third injection, making a total of 81,975 since these were offered in September, 1958. The position on 31st December was as follows:—

	Vaccinated with two injections	Received one injection only	Awaiting vaccination (No injections)
(i) Children born in the years 1943 to			
1959	96,267	400	278
(ii) Young Persons born in the years 1933			
to 1942	22,286	110	44
(iii) Expectant Mothers	5,689	75	28
(iv) General practitioners, ambulance and		:	
hospital staffs and their families	660	-	
Total	124,902	585	350

Approximately 80% of children and 40% of the young persons received protection.

### (XII) AMBULANCE SERVICE

Below are set out the numbers of patients carried and mileage covered during 1959, with comparative figures for alternative previous years.

		Pati	ents			Mileage					
Year	Amb.	S.C.C.	H.C.S.	Total	Amb.	S.C.C.	H.C.S.	Total			
1949 1951 1953 1955 1957 1959	22,958 23,600 43,230 60,535 69,807 77,326	5,397 22,240 50,821 61,819 70,325 84,759	35,696 29,086 37,080 30,472 18,934 13,066	64,051 74,926 131,131 152,826 159,066 175,151	373,071 367,075 444,987 572,879 618,925 665,684	68,575 188,842 311,880 343,151 362,805 453,164	875,970 606,327 373,560 315,162 214,907 173,467	1,317,616 1,162,244 1,130,427 1,231,192 1,196,637 1,292,315			

The columns S.C.C. (sitting case cars) also include figures for the seven bus type vehicles.

The higher totals are mainly reflected in the Clinic (66%) and emergency (6%) percentages, both of which show a slight increase.

224 cases were carried by rail during the year. Developments in this direction is not likely owing to the increase in the number of diesel trains.

Hospital car service drivers continue their helpful service often under difficult conditions.

#### Vehicles

During 1959 two new ambulances and five sitting case cars were put into service, under the replacement programme. One bus type vehicle was added to the vehicle strength.

Stations

A permanent site for an ambulance station was obtained in Moreton-in-Marsh. Existing temporary buildings were available on the site.

Personnel

82 driver/attendants were employed at the end of 1959.

Civil Defence

The Ambulance and Casualty Collecting Section of the Civil Defence Corps now consists of 555 volunteers, of whom 449 have been trained by Service or Corps instructors. A full training and operational exercises programme continues, together with certain driving instruction.

# (XIII) PREVENTION OF ILLNESS, CARE AND AFTER-CARE

# I. TUBERCULOSIS

At the 31st December, 151 persons were receiving free milk at the rate of two pints per day. In 3 cases the supply was reduced to one pint daily. Apart from the extra assistance given to the Tuberculous patient by National benefits, substantial and tangible help is afforded to them by the ten Voluntary Tuberculous After-Care Committees, who raise their own funds. Some of these Committees, in line with the former National Association are extending their help to sufferers with other forms of chest disease and heart disease.

Summary of formal notifications during the year :-

	Number of Primary Notifications of New Cases of Tuberculosis													
Age Periods	0-	I-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Total (all ages)
Respiratory, Males Respiratory, Females Non-Respiratory, Males Non-Respiratory, Females			I -	1 2 3	I 2 2	8 4 1	6 4 3 1	14 26 1	25 13 —	17 11 1 6	25 4 1 2	15 6 —	3 -	113 75 12 15

New cases coming to knowledge during the year otherwise than by formal notification :—

	Number of Cases in Age Groups										•	Total		
Source of Information	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	
Death Returns from Local Registrars														
Respiratory, Male				_	_			—	_	_	_	_	_	- (A)
Respiratory, Female				_				_	_	—	—		3	3 (B)
Non-Respiratory, Male		_	—	—	_		—		—	I		_		I (C)
Non-Respiratory, Female				_			_							– (D)
Death Returns from Registrar General (Transferable deaths)														
Respiratory, Male	_		_	_		_		-		_	_	I	_	1 (A)
Respiratory, Female							_		-	_	-	-	I	1 (B)
Non-Respiratory, Male	_			-		-		I		-	-	-	-	I (C)
Non-Respiratory, Female			-				-	<u> </u>	-	—				- (D)

Source of Information		Number of Cases in Age Groups										Total		
	0-	I-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Total
Posthumous Notifications Respiratory, Male Respiratory, Female Non-Respiratory, Male Non-Respiratory, Female			 					_						I (A) I (B) - (C) - (D)

Totals (A) 2 (B) 5 (C) 2 (D) -

Persons removed from Register during the year :-

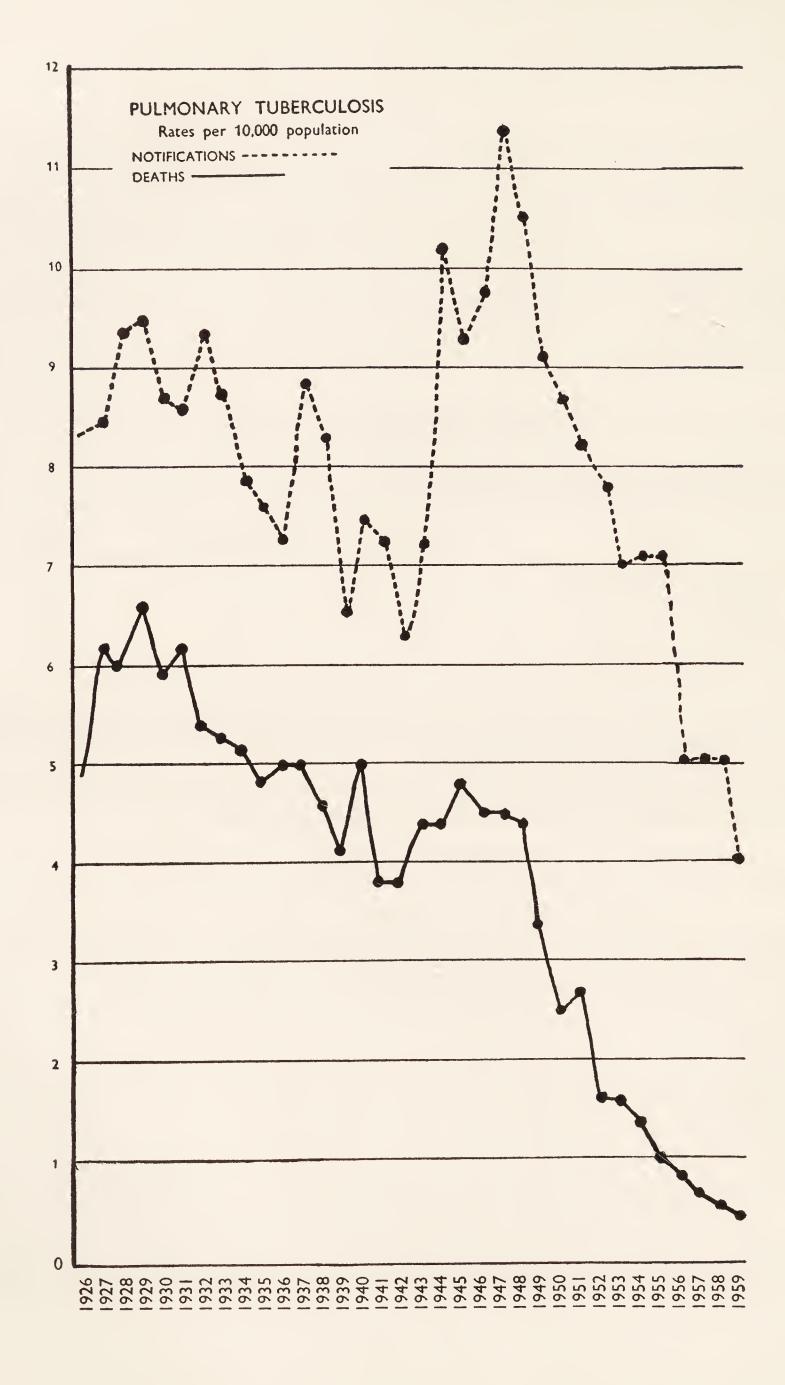
Reason	Pulmonary	Non-Pulmonary	Total
<ul> <li>(a) Withdrawal of Notification</li> <li>(b) Recovery</li> <li>(c) Death</li> <li>(d) Left County or no trace</li> </ul>	9	2	11
	293	30	323
	43	2	45
	139	12	151

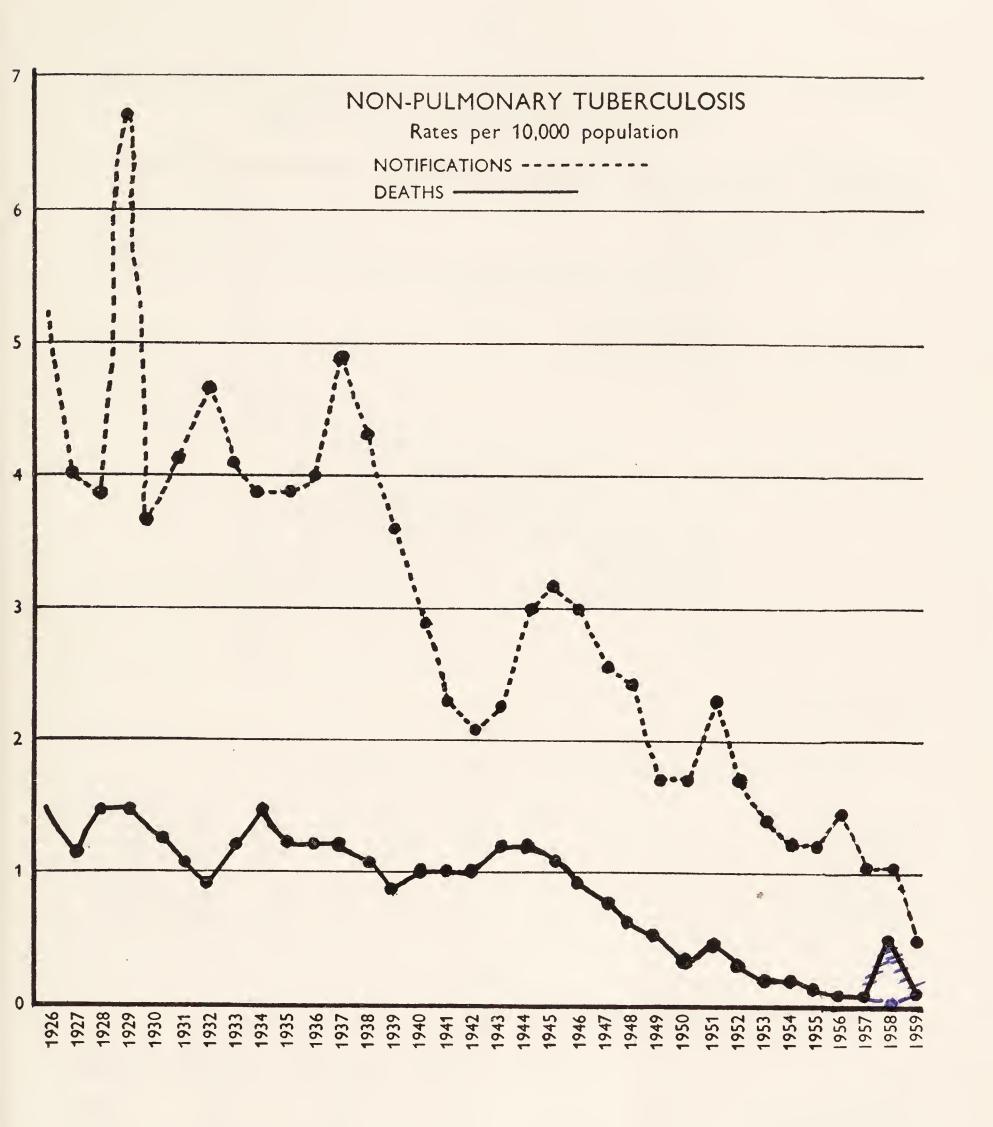
At the end of the year the total number of cases recorded in the registers kept by the District Medical Officers of Health was 3,571 (2,894 pulmonary, 677 non-pulmonary) as compared with 3,877 (3,183 pulmonary, 694 non-pulmonary) at the 1st January.

There were 67 fewer new cases in 1959 than in 1958 and there was a reduction in the number of deaths from 35 to 30. The table below shows the deaths for the years 1954 to 1959.

Deaths from Tuberculosis

Age	1954		1955		1956		1957		1958		1959	
Period	Pul.	Non- Pul.										
Under 1 year	_	2		_	_	_	_	_	_			
I to 4 years	I	—	_	-	_	_		<b>—</b>		_		_
5 to 14 years	—	—	I	I		I	-					
15 to 45 years	24	5	18	3	12	I	8	I	7	I	7	2
45 to 65 years 65 years	27	I	18	_	14	3	15	2	14	I	5	2
and over	14	2	8		15	I	13	2	II	I	12	2
	66	10	45	4	41	6	36	5	32	3	24	6
Totals	7	6	4	9	4	7	4	I	3:	5	3	0





# REPORT OF F. J. D. KNIGHTS, ESQ., M.D., M.R.C.P., SENIOR CHEST PHYSICIAN NORTH GLOUCESTERSHIRE CLINICAL AREA

138 cases of tuberculosis notified in 1959 in the northern area of the County of Gloucestershire were handled in the Chest Clinic Service. They are analysed as follows:—

# County (North Gloucestershire)

Abdominal, Orthops	aedic a	ınd Cer	vical G	lands	• • •	II
Primary or Post-Pri	mary l	Infectio	n	• • •		16
Minimal Phthisis	• • •	• • •	• • •	• • •	• • •	19
Moderate Phthisis	• • •	• • •	• • •	• • •	• • •	77
Advanced Phthisis	• • •	• • •	• • •	• • •		15
Total	• • •	• • •	• • •	• • •	• • •	138

# Clinical Area (North Gloucestershire plus City of Gloucester)

Abdominal, Orthopa	lands	• • •	18			
Primary or Post-Prin		25				
Minimal Phthisis	• • •	• • •	• • •	• • •	• • •	22
Moderate Phthisis	• • •	• • •	• • •		• • •	103
Advanced Phthisis	• • •	• • •	• • •		• • •	20
Total	• • •	• • •	• • •	• • •	• • •	188

# Clinical Area Analysis

TABLE I

Number of New Cases of Phthisis and Severity at time of Diagnosis:—

Year			1951	1952	1953	1954	1955	1956	1957	1958	1959
Total Number	• • •	• • •	263	239	244	229	184	218	160	173	145
Minimal Cases	• • •	• • •	20%	20%	18%	20%	20%	22%	22.5%	17%	15%
Moderately											
Advanced Cases *	• • •	• • •	69%	68%	67%	66%	71%	65%	65%	70%	72%
Advanced Cases	•••	• • •	11%	12%	15%	14%	9%	13%	12.5%	13%	13%

TABLE II

Source of Reference of Cases Analysed in Table 1:—

			1951-1952 (502 cases)	1953-1954 (473 cases)	1955-1956 (402 cases)	1957-1958 (233 cases)	1959 (145 cases)
Referred from G.P.'s	• • •	• • •	43%	41%	44%	48%	55%
Mass Radiography	• • •	• • •	30%	27%	26%	23%	21%
Contact Organisation	• • •	• • •	7%	7%	7%	4%	7%
Hospital, Forces,							
In-transfer, etc.	• • •	•••	20%	25%	23%	25%	17%

Contacts arising out of County cases in the North Gloucestershire Clinical Area notified in 1959.

#### Adults

	Under	45			Over	45	
Uı	ban	R	ural	Ur	ban	R	ural
Called	Response	Called	Response	Called	Response	Called	Response
81	65	119	89	49	29	50	32
	(80%)		(75%)		(59%)		(64%)

Overall percentage of attendance 72%.

One adult was notified as a result of these examinations, the wife of an infectious case who had a normal first film but was picked up with new tubercle on her second attendance.

#### Children

Of 157 children called up 14 did not attend at all, 6 were tuberculin positive and are being kept under observation at the clinic, and 3 were tuberculin positive and subsequently notified: two with a primary focus and 1 with hilar adenitis.

The remaining 134 are analysed as follows:—

Tuberculin + Referred to G.P. and H.V. Ages o to 4	• • •	• • •	I
Referred to G.P. and H.V. Ages 5 to 11	• • •	•••	II
For six monthly X-ray. Ages 12 to 16	• • •	• • •	16
Tuberculin — Successfully B.C.G. vaccinated		• • •	78
Defaulted during B.C.G	• • •	• • •	7
B.C.G. refused—having serial tuberculin test	• • •	• • •	2
Awaiting B.C.G	• • •	• • •	5
Tuberculin tested and/or X-rayed and discharged (at no furth	er risk)	)	14

Mass Radiography Service

134

				Male	Female	Total
Miniature Films	•••	• • •	• • •	22,498	14,467	36,965
Large Films						
Total Recalled		• • •		602	423	1025
Did not attend	• • •	• • •		13	5	18
Normal		• • •	• • •	253	236	489
Significant	• • •	• • •		335	182	517
Being investigate	ed	• • •	• • •	I		I

# Analysis of Tuberculous Cases

	Under 15	15-24	25-34	35-44	45-59	60 and over	Total
Active Tuberculosis Male Female	_ I	5 5	10	4 6	11	2 -	32 22
Total	I	10	16	10	15	2	54

Under Observation  Male  Female	- -	6 4	5 4	7 2	8 6	3 1	29 17
Total		10	9	9	14	4	46
		1					
Leasting Techanomics							
Inactive Tuberculosis  Male  Female	3 3	5	10 5	20 15	26	3 2	67 48 1 unknown
Total	6	17	15	35	36	6	115
Cases previously detect	ed	N	<b>I</b> ale	Fe	male	Т	otal
Active			_		-	-	
Under Observation .	Under Observation				-		
Inactive			29		13		<b>42</b>
Non-Tuberculous Cases		1		1		1	
		N N	⁄Iale	Fe	male	Т	otal
Acquired Cardiac Lesion Abnormality of the Diaphra	 om and		9		8		17
Oesophagus Bronchiectasis	• • • • • •		3 16		4 13	7 29	
					32 4	101	
Congenital Cardiac Lesion Pleural Effusion and Emp		3		I	4		
(Non-Tuberculous) .  Pneumoconiosis without P.I		4		2	6		
Pneumoconiosis with P.M.I Malignant Neoplasms		3	4		3 22		
Non-Malignant Neoplasms Sarcoidosis Other Significant Abnormal		3 3 39		I 2 24		4 5 63	
Total		2	:07		95	3	02

#### 2. GENERAL

# (a) Home Nursing Requisites

The British Red Cross Society and the St John Ambulance Brigade continue to act as the County Council's agents for the temporary loan of articles. The two organisations maintain 71 depots and the voluntary effort expended in administering these depots is a source of much satisfaction.

Articles which are required for long periods or permanently are supplied through the Health Department together with supplies of beds, bedding, disinfectants and paper handkershiefs for tuberculosis patients.

### (b) Rest Homes

Patients, including old people, in need of rest and recuperation, numbering 145 in the year, have been sent to voluntary administered homes. This figure excludes mothers with young children who have been included in the Maternity and Child Welfare Section of this report.

# (c) Health Education

Programmes of health education are arranged by the Area Health Sub-Committees through the Divisional Medical Officers of Health and the Health Visitors.

The major part of Health Education given to parents of young children is in the home in an informal manner and as opportunity offers. However, an increasing amount of formal Health Education is taking place.

Formal group teaching in Child Welfare Centres is often difficult because of inadequate or unsuitable rooms. Small group discussions on subjects connected with health are, however, often arranged by the Health Visitor, sometimes with visits from specialist speakers such as a Dental Hygienist or Chiropodist. A programme of Health Education in Child Welfare Centres is arranged for the whole year and Health Visitors are supplied with display material for use in the Centres on subjects of topical interest; this year, Home and Road Safety, Protection from the sun, Prevention of accidents on the farm and Dangers of Flies and Food Poisoning, etc.

There has been a small increase in the numbers of schools where Health Visitors are invited to give talks to children on matters concerning health. Where this has been undertaken they have proved a great success. 53 such talks were given during the year.

The 12 Mothers Clubs in the County continue to flourish with approximately fifty per cent of their activities devoted to Health Education, usually in the form of talks by experts, discussion groups and films. Health Visitors attended 81 sessions.

At Annual Meetings of Child Welfare Centres it is usual to have a speaker, a Brains Trust or Film on some aspect of child health. Mothers attend these meetings as well as the welfare centre committee members and helpers.

81 talks to independent organisations such as Parent Teachers' Associations and Women's Institutes, Mothers' Unions, etc., were given during the year. There has been an increase in the use of advice and visual aids including films and film strips and it has been found necessary to appoint extra help as the demand for the service has grown.

## (XIV) HOME HELP SERVICE

### Administration

Towards the end of 1958 the relief Home Help Organiser resigned and was replaced by two parttime Organisers, one to assist in the urban area of Cheltenham and the other in the South of the County.

# Home Help Staff

The total equivalent whole-time workers was increased from 323 to 348 during the year. The number of full-time Home Helps employed during the year was increased by two and the number of part-time staff reduced by 27; most of these part-time helpers had been employed on a casual basis and by increasing the hours of other part-time workers available in the same area, some saving on insurance was possible. Wastage where staff consists mainly of married women who have growing families, is naturally high, and constant effort is needed to maintain a satisfactory establishment. Nevertheless, a recent survey showed that among the regular workers no less than 50 had completed 10 years of continuous service.

The Resident Service continues to meet the need of caring for families in isolated homes and where the husband is working away for long hours. One hundred and five families were assisted in this way, showing an increase of 20 on last year. Resident helps were supplied for 6 cases of chronic sick illness or old age to give relief to relatives needing a rest. Fifteen families were given resident help while the mothers were in hospital and two families were assisted where the mother was receiving mental treatment. One resident help resigned on marriage at the end of the year after 11 years service, but this vacancy was filled after only a short period.

## Nightsitters-in

The figure of 27 shows a considerable drop in the number of cases helped by this service during the year. The urban areas of Stroud and Cheltenham had the greatest number of calls and these were spread evenly throughout the year.

### Daily Service

The care of the chronic sick and the aged continues to be the main work. During the year the weekly total of the long term cases continued to increase with the need for regular daily service to old people living alone. A survey taken in November showed that of the 1,600 aged and infirm people receiving home help, 352 would have to be provided with Part III accommodation and another 130 would need hospital beds if the home helps were withdrawn. Apart from economic or social reasons for keeping these old people in their own homes, their preference and happiness at being able to stay in their own familiar surroundings continues to justify the heavy drain on the home help service.

The number of maternity cases increased from 758 to 842 during 1959 and continues to increase. A small number had part-time help for some time prior to and following the normal 14 days allocation.

## Recoverable Charges

The new scale of charges and the fixed minimum charge implemented in January, 1958, was revised in November, 1959, following an increase in the allowances made by the National Assistance Board. The maximum charge of 3/9d. per hour was not altered but the minimum charge of 2/6d. was increased to 5/- per week. Of the 1,353 cases assessed on the minimum charge, 760 qualified for extra National Assistance. Others who did not qualify for this financial help were found to have "other income."

## Home Helps

Full-time (including 7 residents) ... ... 49
Part-time ... ... ... ... ... ... 1,027
Total number of hours of help for the year :
(Resident 17,472; Daily 707,247) ... 724,719

#### Families Assisted

			Chronic	General		Tuber-	
			& old age	Sickness	Maternity	culosis	Total
Cases current 1.1.59		• • •	1,465	148	31	42	1,686
New cases occurring during 1959	• • •	• • •	855	713	763		2,341
Resident cases 1959	• • •	• • •	6	20	79		105
Cases current 31.12.59		• • •	1,511	161	29	35	1,736

Total number of families assisted during the year: 4,132

Nightsitters-in Service: 27.

Families where circumstances investigated but no home help provided: 826.

### (XV) MENTAL HEALTH

#### I. ADMINISTRATION

Staff

There were 41 staff in full time employment, on 31st December, 1959; an increase of 3 in Occupation Centre staff necessitated by the opening of the Cirencester Centre and the increase in the number of trainees attending the Cheltenham Centre.

## 2. Work undertaken in the Community

# (a) Lunacy and Mental Treatment Acts

There has been a further reduction in the number of patients admitted to hospital largely due to the fact that the Psychiatric Out-Patient Clinics encourage more patients to be treated at home. It has rarely been necessary to certify patients to ensure their hospital treatment. The majority of hospital admissions have been on either a voluntary basis or on a short-term Order, primarily for observation. The Mental Health Officers have, in their after-care duties, worked in close co-operation with the Mental Hospitals, and attended lectures at the Hospitals, whose help is greatly appreciated. The weekly case conferences have also proved most valuable.

The following table illustrates the changes in admissions to hospital. This year, additional statistics are included, showing the percentage of non-certified admissions. In England and Wales as a whole, the latest published figures showed that, in 1958, 85% of all admissions to Mental Hospitals were on a voluntary or informal basis.

Classification	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
Certified Voluntary Temporary	170 361 21	139 364 16	137 383 22	131 359 24	112 427 23	123 522 21	94 571 16	68 680 15	49 815 3	23 819 7	32 747 3
Total	552	519	542	514	562	666	681	763	867	849	782
Percentage of non- certified admissions	65.4	70.1	70.7	69.4	76.0	78.4	83.8	90.0	94.0	96.5	95.5

In addition, 76 patients were admitted informally to Dundry Villas Neurosis Unit of the Bristol Mental Hospital.

The Mental Health Officers arranged the admission of 358 patients during the year, in the following categories:—

D	irect			For Ob	bservati	on	
Voluntary		• • •	71	Section II			4
Certified		• • •	12	Section 20	• • •		249
Temporary				Section 21(1)			22
			83				275

The disposal of the patients admitted for observation is summarised thus :-

The disposal	_	posal			Section 11	Section 20	Section 21(1)	Total
Became certi	fied pat	ients		• • •	-	15	I	16
Became volu	ntary p	atients		• • •	2	188	17	207
Became temp	orary p	oatients	• • •	• • •	I	I		2
Discharged	• • •	• • •			I	38	4	43
Died	• • •	•••	• • •	• • •	- Contractions	7		7
	Total			•••	4	249	22	275

During the year 88 patients died in Hospital, and 783 patients were discharged. The Hospitals to which County patients were admitted are detailed in the following table.

Hospital	Voluntary	Certified	Temporary	Section	Section 20	Section 21	Total
Gloucester	323	10			203	19	555
Bristol	191	I	I	3			196
Manor Park, Bristol					31	I	32
Littlemore, Oxford	19	3			15	2	39
Others	7	2		I			10
Total	540	16	I	4	249	22	832

# (b) Mental Deficiency Acts

# (i) admissions to hospitals

Patients were admitted, during 1959, to the following hospitals on a long-term basis:-

				On Petition	Placed by Parent	Court Orders	Informal Admissions	Total
Stoke Park				I	13	I	I	16
Hortham		• • •	• • •	2	I	I	12	16
Pewsey			• • •		I	I	3	5
Sandhill Park	ζ .	• • •	• • •	-	I	distant.	_	I
Borocourt	• • •	• • •	• • •	-	-		I	I
Total	• • •		• • •	3	16	3	17	39

The demand for short-term Hospital care continues to increase. These short-term care admissions are of inestimable value in affording a period of relief to parents from the care of difficult patients. Unfortunately, the acceptance of short-term patients may mean that accommodation is not available when required for a long-term patient urgently requiring admission. The provision of Residential Hostels, particularly for the accommodation of short-term patients, will undoubtedly reduce the list of patients awaiting admission to Mental Deficiency Hospitals. At 31st December, 1959, there were 41 patients on the waiting list for long term care in comparison with the waiting list of 28 patients, at 31st December, 1958.

#### (ii) ASCERTAINMENTS

During the year 132 patients were ascertained as defectives. 62 of these were referred by the Education Committee as requiring supervision after leaving school. The next largest group was the ineducable children, of whom 34 were referred. At the end of 1959, there were 1,455 patients on the register, an increase of 56 from the previous year.

	Unc	der 16	16 ar	Total	
(i) under statutory supervision (ii) under guardianship	M. 162	F. 124 —	M. 253	F. 226	765 6
(iii) in hospital (inc. patients on licence) (iv) under voluntary supervision	62 —	28	237 69	222 66	549 135
Total	225	152	561	517	1,455

### (iii) SUPERVISION

The number of patients under supervision, increased by 30, during 1959, despite the fact that supervision of 92 patients was discontinued. The Committee consider the progress of children, placed under supervision on leaving school, at the end of a two year period.

Of the 906 patients under supervision and guardianship, at 31st December, 1959, 216 were employed, in the following trades:

Domestic work	• • •		34	Factories		• • •	• • •	59
Agriculture		• • •	56	General labou	ırer		• • •	28
Local Authorities			6	Mining	•		• • •	ΙI
Retail Trade			22					

It is difficult to secure employment, particularly for the lower grade and less stable patients, but during the year the number of unemployed fell from 89 to 71. The industrial centres and workshops will be of especial benefit for these patients in providing sheltered occupations.

#### (iv) LICENCE

At the end of 1959, the mental health officers were visiting 5 patients; the majority of patients in this category, however, were supervised by hospital social workers.

#### (v) GUARDIANSHIP

Six patients remained under guardianship. Of these, two were financially assisted.

#### (vi) OCCUPATION CENTRES

The Cirencester Centre was opened on 8th September, 1959. The building is the first in the County specially built and designed for this purpose and is working successfully. The numbers on the registers at the five occupation centres, at the end of the year, were :—

					Average Daily Attendance	Full-time Staff
Cheltenham	• • •	• • •	• • •	97*	86	12
Cirencester		• • •	• • •	44†	33	3
Newnham		• • •		51	40	5
Stonehouse	•••	• • •	• • •	44	42	4
Warmley	• • •	• • •	• • •	78	66	7
To	tals	• • •	• • •	314	267	31

<sup>\*</sup>Including 21 from Gloucester County Borough and 1 from Worcestershire.

Virtually all the patients willing to attend were accommodated in the Occupation Centres, although transport is sometimes difficult to arrange, at an economic cost, for individual children living in isolated areas.

One Supervisor and three Assistant Supervisors commenced their Diploma Courses for Teachers of the Mentally Handicapped.

Contract work a part of industrial training for those over the age of 16 is undertaken in increasing quantities, although it is difficult to obtain sufficient work suitable to the limited ability of the trainees. The trainees much prefer this type of work to the purely occupational filling of their time. They preform routine tasks conscientiously and with interest.

#### (vii) HOME TEACHER

The Home Teacher, takes a group of six children at Chipping Campden, on five days each week. She also assists at the St Mary's Home, Painswick, an ancillary of the Hortham Hospital, on alternate Saturdays.

#### 3. Co-operation with Hospitals

#### (a) Mental Deficiency Hospitals

The monthly Case Conference at Hortham Hospital has been of great value to the Mental Health Officers and permitting relative assessments of the urgency of cases awaiting admission. The continued admission on an informal basis of patients by the Hortham-Brentry Group of Hospitals has been used, whenever acceptable to the Medical Superintendent of the receiving Hospitals, and has been very much appreciated by parents of patients, and has provided a simplified administrative arrangement.

The Mental Health Officers completed 181 reports on behalf of Hospital Management Committees, for leave, statutory reviews and licence.

<sup>†</sup>Including I from Monmouthshire.

# (b) Mental Hospitals

Close co-operation with the staff of the Horton Road and Coney Hill Hospitals, Gloucester, continued and has developed with the Bristol Hospital. The Mental Health Officers and the Administrative Officer attended weekly Conferences to discuss new cases, and also monthly Conferences when the progress of patients, admitted a year previously, were reviewed. Visits were made to patients who had been discharged during the course of the year, in addition to the visits paid by the Mental Health Officers to patients who had been recommended for after-care. The Officers compiled full case histories in respect of all patients admitted by them.

The Mental Health Officers provide reports upon a selected number of discharged schizophrenic patients, in connection with a survey organised by the Nuffield Provincial Hospitals Trust, to provide information of their rehabilitation over successive periods of one to four years.

## 4. THE FUTURE MENTAL HEALTH SERVICE

Proposals for the new Mental Health Service have been prepared for submission to the Minister of Health. The main headings provide for Junior and Adult Training Centres, Residential Hostels for mentally disordered patients who will be able to work in attached Training Centres or in ordinary or sheltered employment, Day Centres and Social Clubs, and the continued supervision and care of the sub-normal and severely sub-normal patients.

To meet this expansion, two additional Mental Health Officers and the necessary Training Centre staff will be appointed. The new Act affords provision for a service for the mentally ill comparable with that available for the person of normal educability and intelligence.

## 3. National Assistance Act, 1948

CARE OF HANDICAPPED PERSONS

#### (a) Blind

### Ascertainment:

There was a decrease of 3 in the number of blind persons on the Register on which there were 961 at the end of the year. There were 109 new registrations showing an increase of 8 on the previous year, exclusive of transfers from other counties.

#### AGE AT ONSET OF BLINDNESS OF NEW CASES, 1959

0	I	2	3	4	5- 10	11-	16– 20	21- 29	30- 39	40- 49	50 <b>–</b> 59	60- 64			80- 84	_	90+	Total
-	-	1	2	0	I	2	2	0	3	3	5	7	9	26	24	17	6	106

## RECOMMENDATIONS OF OPHTHALMIC SURGEONS AND CAUSES OF BLINDNESS

	Recommendations		Caus	ses	
7		Cataract	Glaucoma	Ret. Fib.	Others
(i)	BLIND  (a) No treatment  (b) Treatment, Medical, Surgical or Optical  Number of cases which on follow up action have received treatment	15 7 10	8 5 8		57 11

Based on figures at 31st December, 1959, a table giving details of education and employment is set out below:

Under 2 years At hom	e	• • •	• • •	• • •	I
At hom	e	• • •	• • •	• • •	4
Nurser	y Schoo	ol	• • •	• • •	I
2 - 4 Ineduca	able—I	nstitut	tion	• • •	I
Ineduc	able—a	t hom	e	• • •	I
Attendi	ng Spe	cial So	chools	• • •	8
Educab	le at h	ome	• • •	• • •	2
5 - 15 Ineduca	able, in	Instit	tution o	r at	
home	2	• • •	• • •		7
Undergoing training for Sh	eltered	Empl	loymen	t	2
Undergoing training for O	oen Em	ployn	nent		I
Undergoing training for Pr	ofession	nal En	nploym	ent	I
Unemployed, but capable			_		
for Open Industry			•••	• • •	5
Unemployed, but capable v	without	traini	ng	• • •	6
Workshops for the Blind		• • •	•••	• • •	8
Home Workers	• • •	• • •	• • •	• • •	16
Gainfully Employed					
Agricultural Workers			• • •	• • •	I
Basket Maker, St Dun	stan's	•••			I
Clerks and Typists		• • •			2
Dealer	• • •		• • •		I
Domestic Workers					4
Factory Operatives					30
Gardener					I
Labourers	• • •	• • •	•••	• • •	4
Massage and Physioth		St Du	nstan's	• • •	2
Mat Maker, St Dunst					I
Minister of Religion					I
Music Teacher	• • •		• • •	• • •	I
Newsvendor	• • •	• • •	• • •		I
Office Executive, St D			• • •		I
Piano Tuners				• • •	4
Porter	• • •				ī
Poultry Keeper	• • •			• • •	I
Telephone Operators	• • •		• • •	• • •	5
Sundry	• • •	•••	• • •		6
					132
Not available for Employm	nent, 16	5 - 59			64
Not available for Employn					36
Not Capable of Work, 16 -		•••			56
Not Capable of Work, 60 -		• • •	• • •	• • •	21
Over 65	•••				652
Total	• • •	• • •	• • •	• • •	961

During the year 5 men have received Industrial Rehabilitation at America Lodge, Torquay. One man was accepted as a trainee at the London Association for the Blind in the Plastic Moulding Section. Employment was obtained by the Placement Officer for the Royal National Institute for the Blind in sighted industry for four men.

Two Home Workers retired owing to ill health, one removed to another County, and two Machine Knitters were removed from the scheme due to unsatisfactory work.

## Home Teaching Service

Social Clubs are held at Almondsbury, Cheltenham, Cinderford, Cirencester, Kingswood, Stroud, Tewkesbury and Wotton-under-Edge. A monthly Club for the Deaf-Blind has been started in Stroud. There are now five handicraft classes held weekly at Cirencester, Stonehouse, Stroud, Soundwell and Tewkesbury. At these classes 848 lessons have been given. The Home Teachers paid 7,608 visits to the Blind and Partially-Sighted in their own homes, and gave 848 lessons in reading embossed literature (Braille and Moon), Deaf/Blind Manual and Handicrafts. The work done at home and in the classes is excellent.

#### Homes

#### ELLERSLIE, ALBERT ROAD, CHELTENHAM

There is accommodation for 37 which has been kept filled throughout the year. The erection of a summerhouse was very much appreciated as it provided some shade in the garden during the hot weather.

#### FERNEY HILL, HOME FOR THE INFIRM BLIND, DURSLEY

The new wing was opened by Alderman Leslie Bayley on Tuesday, 22nd September. This has eased the running of the Home having the residents on the ground floor. The Home accommodates 19 women and 4 men. The few vacancies are quickly filled. With an ageing population there is a constant demand for beds. Both Homes have waiting lists for admission.

The valuable help given by Voluntary Helpers is greatly appreciated by the residents and the staff.

#### (b) Partially-Sighted

During the year 17 names where added to the Register, making a total of 128 on the Register—an increase of six. Six names were removed to the Blind Register. One decertification due to improved visual acuity.

TOTAL NUMBER ON REGISTER—AGE GROUPS, 31ST DECEMBER, 1959

0-1	2-4	5-15	16–20	21-49	50-64	65 & over	Total
		19	14	31	13	51	128

The following table shows how the Register is compiled:—

Aged

75 HOW LITE	register is comp.	nca.			
2 - 4	At home	• • •			0
5-15+	At Special Sch	ools	• • •		II
5-15+	At Ordinary So	chools	• • •		5
5-15+	At home		• • •		2
5-15+	Ineducable		• • •		I
15+	Training	• • •	• • •	• • •	5
	Employed	• • •	• • •		33
	Unemployed		• • •		2
	Not Available		• • •	• • •	69
	To	tal	• • •		128

## NEWLY REGISTERED, 1959

OI	2-4	5-15	16–20	21-49	50-64	65 & over	Total
gradena		5		2	3	7	17

## RECOMMENDATIONS OF OPHTHALMIC SURGEONS—CAUSES OF PARTIAL BLINDNESS

Recommendations	Causes			
	Cataract	Glaucoma	Ret. Fib.	Others
<ul> <li>(a) No Treatment</li> <li>(b) Treatment (Medical, Surgical or Optical)</li> <li>(c) Number of cases which on follow up have received</li> </ul>	2	I		5 9
treatment	4	3	u-main-main	9

# (b) Deaf and Others (Deaf and Dumb)

The numbers on the register were 75 Deaf and 893 Hard of Hearing on 31st December, 1959.

One thousand, three hundred and seven visits were made by the Welfare Officer; 32 were to babies under 2 years of age, 383 to children in the age group 2 to 16, 288 to persons over 16 but under 65, and 587 to those over 65. Seventeen were with the Otologist.

There are now 3 clubs catering for the Deaf and Hard of Hearing, apart from the one provided by the Gloucester Diocesan Association for Deaf and Dumb. One at Filton, and another at Stroud, are both held in the evening. The Cheltenham Club for the Hard of Hearing is held in the afternoon, which appears to account for its membership being small. The lipreading class at the Stroud Club had to be given up owing to pressure of work, and there is need for additional clubs to provide lipreading classes. Individual needs, necessitating evening visits in so many cases, have made it impossible for the Welfare Officer to maintain regular evening commitments.

In September an experimental club for the deaf blind was opened by the Stroud area Home Teacher for the Blind and the Welfare Officer for the Deaf. The club, held in the Stroud Community Centre, started with 6 deaf blind people and has been successful and proved its worth.

The Welfare Officer has maintained a domiciliary service for the fitting of hearing aids and ear moulds to housebound deaf and hard of hearing in the Cirencester area which is not covered by audiology technicians making home visits.

Continuity of advice to parents of deaf children has been ensured by the Welfare Officer sitting in on Assessment and Training Clinics at the Gloucester Royal Infirmary.

The need for a further education service for adult deaf has repeatedly shown itself during the year. Many adults who were educated as "deaf" in the days when individual aids were not easily available, have some useful hearing, and are on the whole most anxious to make use of it. They need, however, intensive auditory training and, in particular, the young adults need their language and vocabulary increased. This requires the services of a qualified teacher of the deaf, but such a service would be more than compensated for by the improvement in language and social integration of probably the only class of handicapped people whose education ceases abruptly at the age of 16 with no facilities for further help.

# (c) Physically Handicapped

The total number at present requiring help is 1,914. During the year 245 new applications were received, mainly from hospitals and General practitioners. The cases fall into the following age groups:—

			Male	Female
Under 16 years		• • •	126	96
16 to 64 years	• • •	• • •	673	620
Over 65 years	• • •	• • •	149	250

These figures show a fall of 26 in the number of handicapped children while the numbers over 65 years of age have increased by 143 (49 male, 94 female).

An analysis of the register shows that the chief causes of disability are as follows:—

Rheumatoid Arthritis and	d Osteo	o-Arthr	ritis	•••	328
Poliomyelitis	• • •	• • •		• • •	217
Spastics (Cerebral Palsy)		• • •			146
Hemiplegia	• • •		• • •		130
Amputations	• • •	• • •			125
Surgical T.B		• • •		• • •	117
Congenital Deformities	• • •	• • •		• • •	99
Injuries due to accident	• • •		• • •	• • •	
Disseminated Sclerosis		• • •	• • •		93 84
Heart Diseases		• • •		• • •	
Bronchiectasis and Asthn	*	• • •	• • •	• • •	76
Epileptics	ııa	• • •	• • •	• • •	51
Muscular Diseases	• • •	• • •	• • •	• • •	47
Ostsamunalitia	• • •	• • •	• • •	• • •	43
•	• • •	• • •	• • •	• • •	26
Parkinson's Disease	• • •	• • •	• • •		23
Arterio-Sclerosis	• • •	• • •	• • •		5
Other Diseases	• • •	• • •		• • •	304
Total	• • •	• • •		• • •	1,914

In addition 124 cases of Pulmonary T.B. are having occupational therapy, an increase of 27 cases since last year. To these patients 371 visits have been made.

It is interesting to note that the numbers suffering from polio and congenital deformities have decreased while there has been a very marked increase in the number of cases of rheumatoid arthritis and osteo-arthritis requiring help, and to a lesser extent an increase in the cases of cerebral palsy, hemiplegia, bronchitis and Parkinson's disease.

## Occupational Therapy

The Occupational Therapy Service continues to expand and during the year 3,957 visits have been made by the four Occupational Therapists. Centres for occupational therapy have been opened in Stroud, Cinderford and Soundwell during the year. The Forest of Dean centre at Cinderford is open each Thursday for the whole day, while Stroud and Soundwell centres are held on one afternoon each week. At these centres numbers increase as more transport facilities are available. The disabled people enjoy working together and a healthy amount of competition spurs them on to produce really saleable articles. A severely disabled person is often unable to produce first class articles unaided, but with a little help from a less disabled person, excellent results are produced.

## Rehabilitation Conference

A conference on Rehabilitation was held at Cowley Manor, to explain this side of the work and to stress the value of a closer link with the hospitals.

As a result of this conference, Functional Assessments Units are now being established in some of the Gloucestershire hospitals. An exhibition of occupational therapy and aids to daily living which was shown at the conference attracted a great deal of interest, and produced many orders and enquiries.

## Marketing

The marketing of products made by the handicapped people, both in their homes and at the centres, is still a problem. This year a greater number of sales have been arranged with the following results:—

itions	• • •	£613
• • •	• • •	£211
• • •		£187
• • •	• • •	£1,011
	• • •	

This shows an increase of £179 on last year's sales. The four Occupational Therapists have worked hard to raise the standard of the articles produced and 90 disabled people are now able to make saleable goods, while 9 knitters are kept busy with orders.

# Voluntary Help

The Voluntary Area Committees continue to give invaluable help with regular visiting of the disabled, meeting from their own funds any special needs which are not available from Welfare Services. The outings and social meetings arranged by these Committees are the highlights of the year for many of the disabled people who thereby meet and get to know each other.

# Holidays

Holidays have been arranged for many of severely disabled people, thus giving those who care for them at home a much needed rest.

The Good Companions Club for the Disabled in Cheltenham, which is run by the British Red Cross Society, continues to increase its membership and fulfils a real need.

### SECTION C

### **DISEASES**

### 1. Infectious Diseases

The notification of infectious diseases received during the year are set out in Table II at the end of this report.

### (a) Diphtheria

No cases were notified. This is the sixth year in succession without a case of Diphtheria.

#### (b) Scarlet Fever

The number of notifications of scarlet fever was 374 as compared with 257 in 1958, and an average of 451 over the previous ten years. The districts most affected were Gloucester (96), Mangotsfield (46), Cheltenham Municipal Borough (32), Sodbury (32), East Dean (25) and Dursley (20).

## (c) Measles

There were 6,273 cases notified as compared with 3,288 in 1958. There were three deaths.

# (d) Whooping Cough

The number of cases notified was 379 as compared with 753 in 1958. There was one death.

## (e) Pneumonia

There were 198 cases of pneumonia as compared with 204 in 1958. Of these 88 occurred in urban districts and 110 in rural districts. 227 deaths were recorded as compared with 206 in 1958.

## (f) Influenza

Although there was no Influenza epidemic in 1959, 119 deaths were recorded as due to or associated with this disease. The last epidemic was in the Autumn of 1957.

## (g) Gastro-Intestinal Diseases

302 cases of dysentery were reported as compared with 133 in 1958, 79 in urban districts and 223 in rural districts. The greater awareness of this entirely preventable disease accounts for some of the recorded increase.

# (h) Diseases of the Central Nervous System

The number of cases of anterior poliomyelitis notified was : paralytic 1 and non-paralytic nil.

# (i) Puerperal Pyrexia

The notifications decreased from 151 in 1958 to 119.

#### 2. Veneral Diseases

The following table shows the number of County cases coming under treatment during 1959 at the various treatment centres.

				Other	
		<b>Syphilis</b>	Gonorrhoea	Conditions	Total
Bristol, Maudlin Street C		I	21	65	87
Bristol, Southmead Hospi		I	I	5	7
Cheltenham General Hos	pital	I	15	67	83
Gloucester, Glos. Royal I	-	6	29	106	141
Oxford, Radcliffe Hospita	1	6min 90.00076		-	
			-	*****	
Total		9	66	243	318
			Nagalija delimente	-	
The figures for the past five ye	ears:				
1955	• • •	23	45	241	309
1956	• • • • • • • • • • • • • • • • • • • •	21	44	247	312
1957	• • • • • • • • • • • • • • • • • • • •	21	50	263	334
1958	• • • • • • • • • • • • • • • • • • • •	7	46	208	261
1959	• • • • • • •	9	66	243	318

The increase in cases of gonorrhoea cannot be ignored. The increase in large towns in other parts of the country is said to be due to promiscuity amongst teen age girls. This is a social problem with which the health service cannot be entirely disassociated.

## 3. Malignant Diseases

## (a) Cancer Bureau

I am obliged to Major R. Leyland, the Records Officer of the Regional Cancer Records Bureau for the following statistics:

- (i) Cases registered with the Cancer Bureau in 1959 ... 1,008
- (ii) Survival table as at 31st December, 1959, of cases

registered in 1954:

1051010104 111 1	777					
Region					Total Cases	Alive
Malignant Growths of	_					
Stomach	•		• • •	• • •	57	I
Colon	•	• • •	• • •	• • •	45	5
Rectum	•	• • •	• • •	•••	37	6
Eye	•			• • •	I	
Breast	•	• • •	• • •	•••	100	44
Lip and Mouth		• • •	•••	•••	7	2
Tongue	•	• • •	• • •	• • •	4	-
Other Buccal Cav	ity (n	ot Pha	rynx)	• • •	21	I
Thyroid	•	• • •	• • •		5	2
Bladder	•	• • •		• • •	30	7
Liver and Gall	•	• • •	• • •	• • •	5	-
Prostate and Male	e Gen	ital	• • •	• • •	22	4
Pancreas	•	• • •	• • •	• • •	22	I
Bone	•	• • •	• • •	• • •	9	
Kidney		• • •	• • •	• • •	3	-
Lung		• • •		• • •	86	I
Parotid	•	• • •	• • •	• • •	3	3
Larynx and Phary	ynx	• • •	• • •	• • •	7	
Oesophagus	•	• • •		• • •	14	I
Cervix	•	• • •	• • •	• • •	25	II
Uterus	•	• • •			23	IO
Vulva and Vagina	l				8	4
Ovary	•			• • •	23	3
Brain and C.N.S.			• • •	• • •	IO	I
Melanoma	•	• • •	• • •	• • •	4	2
Reticulo Endothelial I	Diseas	es		• • •	28	7
Other Malignant Dise	ases			• • •	IO	4
						**********
Т	'otal	• • •	• • •		609	120
					******	

# **SECTION D**

# SANITARY CIRCUMSTANCES OF THE COUNTY

# CHELTENHAM BOROUGH

Number of Houses and Flats constructed in Cheltenham during 1959

- (i) Built by Local Authority: 63. The figure for flats includes The Elms, Swindon Road, which was carried out in conjunction with the County Council for old peoples' accommodation.
- (ii) Built by Private Enterprise: 338.

#### Sewerage

New Arle Outfall sewer in course in construction.

# Water Supply

Approximately 5,500 yards of new mains have been laid during the year, the diameter of the pipes ranging from under 3 in. to 9 in. Some 1,094 yards of main renewals were laid. There have been no changes in the sources of supply.

## KINGSWOOD URBAN DISTRICT

#### Water

During the year the statutory water undertakers, the West Gloucester Water Company, were amalgamated with the Bristol Water Company.

Occasional samples of water for chemical analysis and bacteriological examination were taken by the department and found to be satisfactory.

Sewerage

New housing development has continued throughout the year with the necessary extensions to the main sewerage system. This added to the troubles of overloading the Conham Sewerage Works. The works are now handling approximately  $2\frac{1}{2}$  times the daily flow for which they were designed in 1938.

Work was in hand to divert part of untreated sewage and to pump all affluent from the outfall into the Bristol sewers.

STORM WATER—Extraordinary storms of rain during the year caused considerable flood damage in different parts of the district. Flooding occurred in Station Road, New Cheltenham Road, Kingsholme Road, Central Avenue, Hanham and in several other places to a lesser degree.

Plans are being prepared to extend the storm water to prevent a recurrence, and certain constructional work in the Station Road locality has already taken place.

Housing

Progress made under Housing Survey: Progress was made in dealing with unfit properties listed in the Housing Survey list. Altogether 10 clearance orders were confirmed by the Ministry of Housing. A total of 40 houses were included. Also 34 houses were dealt with under Section 16/17 of the Housing Act as demolition orders or closing orders. A further 8 dwellings were dealt with by informal action with the owners.

Houses demolished and persons rehoused in 1959:

•	Houses		
	Demolished	Persons	Families
Clearance areas	4	42	14
Procedure under Section 17 Hous-			
ing Act, 1957	12	62	19
Unfit Houses certified by M.O.H.	4	8	3
Houses made fit and defects remedied:			
After informal action	•••	• • •	36
After formal action (a)	P.H. Act, 1936		3
(b)	Housing Act, 1957	• • •	I

# MANGOTSFIELD URBAN DISTRICT

# Water

No complaints were received concerning the quality of the public water supply. Negotiations were entered into, towards the end of the year, with the Bristol Water Works Company regarding the extension of their mains to supply water to six houses in Moorend which still rely on wells. Sewerage

The final length of the Downend Relief Sewer has now been completed.

Three schemes of Surface Water Drainage are envisaged for the coming year, together with improvements to the Leap Stream in collaboration with Warmley R.D.C.

Houses not in Clearance Areas:

Houses Demolished

As a result of formal or informal procedure under Section 17 of the

Housing Act, 1957 ... ... 28

Unfit Houses made fit:

After informal action by Local Authority 14
After formal action by Local Authority ... 4

# STROUD URBAN DISTRICT

Water

No extension to the mains were made during the year.

# Sewerage

The second instalment of the Painswick Valley service—Gannicox to Stratford Road—was completed during the year. The new Paganhill Lane sewer was completed, which will take the majority of the soil drainage from the Farmhill Housing Estate, and at the same time provide main drainage facilities for properties in Paganhill Lane.

# CIRENCESTER RURAL DISTRICT

Water

Most of the work in Phase II of the Churn Valley Water Scheme was carried out during the year This included the construction of a 120,000 gallon reservoir and a booster station.

The former Ministry of Works Pumping Station at the Polish Hostel, Fairford, was taken over on April 1st and a scheme for new mains for Fairford prepared and approved by the Minister.

Sewerage

Construction of a new sewer for Fairford started on January 1st, 1959.

Negotiations for South Cerney sewerage scheme continued and schemes for the parishes of Kempsford, Ampney St Peter, Ampney Crucis, Poulton and Driffield were initiated.

Housing

During the year 10 bungalows for old people were completed at Fairford and 8 at Lechlade. 14 houses were erected at Quenington and 22 at Kempsford.

A housing survey of the district was completed during the year.

The drive to secure cottage improvement continued and a total of 321 schemes of improvement had been completed by the end of 1959, and many more are in various stages of preparation.

#### NORTH COTSWOLD RURAL DISTRICT

Water

During the year the Council accepted a tender for the laying of new mains and taking a supply of water to the Temple Guiting area. When this is finished it will complete the Council's comprehensive water scheme.

Despite the drought during the summer the Council was able to maintain distribution of supply without restriction.

Discussions were held during the year regarding the draft order for the proposed new Cotswold Water Board.

Sewerage

Work started on a new disposal works at Blockley and the laying of new sewers at Draycott and Paxford and this scheme was nearing completion by the end of the year.

The Council submitted schemes for sewerage and sewage disposal at Guiting Power, Little Rissington and Naunton. The scheme for Lower Slaughter was still under discussion with the County Council.

Individual action under Section 16 of the Housing Act, 1957, was taken in respect of 19 houses. 15 new houses were erected by the Council and 43 by private enterprise. At the end of the year 38 Council houses and 20 private enterprise houses were under construction.

64 improvement grant schemes were completed, bringing the total up to 349 at the end of 1959.

### NORTHLEACH RURAL DISTRICT

Water

Mains were laid at Compton Abdale, Hampnett, Salperton and Turkdean during the year and this completes the Council's comprehensive water scheme, all parishes now having a public mains supply, with the exception of Withington and Yanworth which have suitable and sufficient private supplies.

Sewerage

The Ministry approved in principle a sewerage scheme for Andoversford.

Housing

The Council bought and modernised 5 cottages at Hampen and also bought a large Manor house in Northleach which was turned into 7 flats.

#### SODBURY RURAL DISTRICT

Water

With the exception of the parish of Hawkesbury (supplied by Kilcot Pumping Station) the area is supplied with water by the Bristol Waterworks Company, who are now the Statutory Water Suppliers.

There have been small extensions of the service and others are planned.

Sewerage

Main Valley Sewerage Scheme—Proposals will be considered by the Minister of Housing and Local Government after a public local inquiry to be held in February, 1960.

These proposals envisage the laying of a trunk sewer from the Bradley Brook Sewerage Works along the valley of the Bradley Brook and the River Frome and thence through the City of Bristol to a point at Eastville, there to connect with the City Council's new Northern Storm Water Interceptor which is now being laid to this point.

In conjunction with the trunk sewer, improvements of the Bradley Brook Works are to be carried out to provide for the discharge of a partially treated effluent into the trunk sewer to be connected to the Bristol system.

Generally these proposals deal with the whole of the Frome Valley Drainage area and the ultimate treatment of all sewage from the valley will be possible at a works to be constructed at Holesworth, Avonmouth, when the connection of all the trunk sewers down the valley of the River Frome is completed.

Filton/Southmead Road Flood Relief Sewer—This scheme, to relieve the surcharging of foul and surface water sewers in the area of Southmead Road, Filton, in times of storm was completed in January, 1959.

Pucklechurch—A scheme to sewer the village of Pucklechurch to a disposal works on the east side of the village with a small separate works for the Parkfield area, and connections to the Warmley sewer, near Mangotsfield Railway Junction, for the Shortwood district was commenced in July, 1958 and completed in December, 1959. This scheme enabled two small sewage works serving Council estates to be abolished.

Old Sodbury—This scheme provides for the laying of lengths of sewer north and south of the village with a further branch to Coombes End finally connecting to the head of the existing sewer at Frome Bridge. Approximately 105 dwellings would be served.

Stoke Gifford—These proposals provide for a length of sewer to serve the older portion of Stoke Gifford, the Harry Stoke, Hambrook Road and North Road areas.

The scheme is divided into two parts, one section of which will discharge into the existing sewer at Hambrook, whilst the North Road and Harry Stoke districts will discharge into the Filton Ring Sewer and thence to the Bradley Brook works of the Filton and Frome Valley Joint Sewerage Committee.

Unfit houses—During the year under review the Council dealt with a further 27 houses. This brings the total that has received attention under the Five Year Programme to 155.

The Council's records show that there are now 102 dwellings still requiring action to complete the programme.

Rent Act, 1957—During the year only three applications for certificates of disrepair were received, and this brings the total to 40 since the coming into operation of the Act. Last year the number was 18.

#### STROUD RURAL DISTRICT

Water

During the year the mains were extended to supply the further development of Stonehouse Park site and Minchinhampton Glebe site. 8,929 properties in the district are now served with mains water. Sewerage

The work on connection to the main sewer of the properties within the boundary of Moor Court Hotel, Amberley, was completed early in the year and it is hoped that the work of connecting Amberley Ridge Special School will be completed in 1960. The extension of the sewer at Marsh Lane, Leonard Stanley, was completed in July. A small sewer disposal works was constructed at Priory Fields housing site at Horsley. A further extension to the sewer at Houndscroft has been commenced. Housing

During the year 153 private and Council houses were completed, and 164 were in course of construction.

# TETBURY RURAL DISTRICT

Housing

Council houses completed	during	the year	• • •	16
Private enterprise houses	• • •	• • •	• • •	14

#### THORNBURY RURAL DISTRICT

Sewerage

The Alveston sewerage scheme is nearing completion. The Charfield sewerage scheme has been commenced.

Approval is awaited in connection with sewerage schemes at Olveston/Tockington, Almondsbury, Wanswell and Thornbury (extensions and additions).

Housing

During the year 37 Council houses were erected and 240 were erected by private enterprise.

#### WARMLEY RURAL DISTRICT

Water

During the year 8 samples of water were taken and sent for examination and all were found to be unsatisfactory. These samples were taken from the Parishes of Bitton and Oldland.

The total number of connections made during the year to the Bristol Water Company's Mains Supply was 264.

Sewerage

There were no extensions to the sewer during the year but the following properties were connected to the existing public sewers (excluding new buildings):

				Total		
Parish				Connections	Pails	Cesspits
Bitton	• • •	• • •	• • •	2	I	I
Hanham Abbots	• • •	• • •		I	I	-
Oldland	• • •	• • •	• • •	I	I	Contractor

## Demolition:

	No. of Houses
Houses in clearance area	19
Demolition and Closing Orders:	•
1. (a) Houses demolished as a result of formal or informal pro-	
cedure under Section II	II
(b) Houses closed in pursuance of an undertaking given by the	
owners under Section II and still in force	6
2. Informal Action:	
Number of unfit or defective houses rendered fit during the	
year as a result of informal action by the Local Authority under	
the Public Health or Housing Acts	10
New Houses erected:	10
Total number erected during year—	
Council	81
Private Enterprise	273

#### SECTION E

# INSPECTION AND SUPERVISION OF FOOD

## I. Milk Supply

The number of licensed pasteurising plants in operation at the end of 1959 was 24, a reduction of one from that shown in the 1958 report.

One of the licensed heat treatment plants changed over from Batch Holder processing type to a High Temperature Short Time plant.

The number of samples submitted for laboratory examination was 1,870. There were 20 failures to the Phosphatase Test. None failed the keeping quality test.

Sampling of designated milk (i.e., Sterilised, Pasteurised and Tuberculin Tested) in specified areas within the County has also been continued. The County Public Health Officers collected 305 samples. Two pasteurised milk samples failed the phosphatase test, none failed the methylene blue reductase test. Of the 60 Raw Tuberculin Tested milk samples taken and submitted for examination 18 failed the keeping quality test.

### (a) School Milk Supplies

It is pleasing to report that the number of schools receiving raw tuberculin tested milk was reduced in the year of this report from 9 to 5. In one case the raw milk was found on biological examination to contain the organisms of Brucellosis and was, therefore, substituted by a pasteurised milk.

# (b) Milk supplies to County Council Establishments

The milk supplies to nurseries, school canteen kitchens and other County Council establishments have been sampled regularly.

A raw T.T. milk sample taken from an Old People's Home was found to contain tubercle bacilli. The raw milk supply was changed to pasteurised milk.

In conjunction with the Ministry of Agriculture, Fisheries and Food further sampling and extended enquiries were made in an attempt to trace the origin of the infected milk.

# (c) Milk supplies to Hospitals

Periodic sampling of milk delivered to the hospitals of the Gloucester, Stroud and Forest Group was maintained. No unsatisfactory samples have been reported.

## (d) Hospital Dairy Farm

Milk from Coney Hill Hospital farm has been sampled regularly throughout the year on behalf of the Ministry of Health. Of 13 samples submitted for examination 5 failed to satisfy the Methylene Blue Reductase Test. The Ministry was notified in each case.

# (e) Biological Examination of Milk

All Raw T.T. milks which are sampled are submitted for biological examination in addition to the statutory test. This policy has been justified once more in the discovery of the organisms of Tuberculosis in one instance and in the culture of Brucella Abortus from another sample. In the latter instance, all relevant details were sent to the District Council for their further action and also to the Ministry of Agriculture, Fisheries and Food.

SUMMARV TABLE OF MILK SAMPLING, 1959

Turb Te			os.	Meth.	731			Total		
		Phos. Test		Te		Meth. Te	Blue	Samples Examined		
Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail			
		1850	20	1870				1870		
35		190	2	192		60	18	305		
	_	714	6	718	2	12	6	738		
_		79	_	79	_	II	2	92		
		17		17		8	5	30		
-	_		_		-			14		
	— 35	 35	1850 35 - 190 714 79 - 17	—     —     1850     20       35     —     190     2       —     —     714     6       —     —     79     —       —     —     17     —	—     —     1850     20     1870       35     —     190     2     192       —     —     714     6     718       —     —     79     —     79       —     —     17     —     17	—     —     1850     20     1870     —       35     —     190     2     192     —       —     —     714     6     718     2       —     —     79     —     79     —       —     —     17     —     17     —	—     —     1850     20     1870     —     —       35     —     190     2     192     —     60       —     —     714     6     718     2     12       —     —     79     —     79     —     11       —     —     17     —     8	—     —     1850     20     1870     —     —     —       35     —     190     2     192     —     60     18       —     —     714     6     718     2     12     6       —     —     79     —     11     2       —     —     17     —     8     5		

## 2. Water Sampling

The systematic sampling of drinking water supplies at County Council establishments and dwellings has been continued.

The water supply at Old Dean Hall Special School has been sampled regularly as a check on its chlorination by means of automatic feed. Samples were generally of a satisfactory nature. It is anticipated that this property will be supplied by mains water by the West Dean Rural District Council within a very short period.

## 3. Food Hygiene

Routine inspections of school canteen kitchens and serving rooms, central cooking depots and also kitchens in Welfare Homes, Nurseries and Homes for the Blind have been made. Defects in equipment and fittings have been reported to the respective departments, and also infringements under the Food Hygiene Regulations, 1955.

Where appropriate, necessary alterations and recommendations to this end have been made.

# 4. Diseases of Animals (Waste Food) Order, 1957

Although the number of plants licensed under the above Order has again been increased it is still disturbing that a number of people who are operating plants and carrying out the collection of Waste Food have not applied for the necessary licence. During a recent outbreak of Foot and Mouth Disease in this County it was found that on the premises where the outbreak had possibly started, a collection of waste food, untreated, had been used for the feeding of animals.

I would again emphasise the importance of publicity of the requirements of this Order.

# 5. REPORT ON THE WORK UNDERTAKEN BY ANIMAL HEALTH DIVISION 28 DURING

1959 supplied by Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries

# (a) Diseases of Animals Acts and Orders

Notifiable diseases were dealt with as follows:—

				19	59	1958			
E	isease			Negative Reports Investigated	No. of Confirmed Cases	Negative Reports Investigated	No. of Confirmed Cases		
Anthrax	• • •	* * *	• • •	147	2	184	4		
Atrophic Rhini	tis			I					
Foot and Mout	th		• • •	47	10	3			
Fowl Pest				109	58	9	ı		
Swine Fever				78	50	101	36		
Tuberculosis	• • •	• • •	• • •	4	3	7	6		

# (b) Milk and Dairies Regulations

On 31st December, 1959 the position regarding dairy herds in the division was as follows:-

- (1) Number of Attested Herds ... 3,946 (2) Number of Supervised Herds ... 20
- (2) Number of Supervised Herds ... 20 (3) Number of Non-designated Herds ... 143

In addition there were 650 Attested and 4 Supervised non dairy and beef herds.

The total number of Attested herds in the County on 31st December, was 4,596 and 24 Supervised herds.

During the year, 2,697 herd inspections were made in connection with licensed T.T. herds, involving the clinical examination of 115,868 cattle.

In addition to these inspections, the cattle in the 143 non-designated dairy herds were clinically inspected and compulsorily tuberculin tested under the Area Eradication Plan for Tuberculosis.

#### (c) Tuberculous Milk—Veterinary Investigations

During 1959, one initial report of tubercle bacilli having been found in milk involving 4 herds was received from the Medical Officer of Health. Bulk samples of milk from these herds have been taken but final results of milk samples have not yet been received.

## (d) Congenital Bovine Tuberculosis

No cases of Congenital bovine tuberculosis were reported by Medical Officer of Health during 1959.

# (e) Brucella Abortus Infection in Milk

No reports were received from Medical Officer of Health involving illness in human beings from the consumption of milk infected with Brucella Abortus.

# (f) Tuberculosis Attested Herds Scheme | Area Eradication Plan for Tuberculosis

On 1st March, 1959 Gloucester was declared an Eradication Area under the Area Eradication Plan for Tuberculosis and from that date owners who had not made applications to have their herds tuberculin tested during the free testing period had their herds compulsorily tuberculin tested, when any reactors disclosed were valued and slaughtered by the Ministry. On 1st October, 1959 Gloucestershire was included in the Southern England Attested Area and as stated previously, only 143 herds out of a total of 4,763 herds in the division had failed to be upgraded to Attested status by 31st December, 1959.

# (g) Calf Vaccination Scheme

During 1959, 9,008 calves from the age of four months up to the date of service were vaccinated under the above scheme, which operates for the purpose of conferring immunity against infection with contagious bovine abortions.

# (h) Swine Fever—Registered Vaccinated Herds Scheme

The object of this Scheme is to encourage pig breeders to have their herds vaccinated with Crystal Violet Vaccine, which confers an immunity against infection with Swine Fever. The number of herds participating in the Scheme in the division was 38 on 31st December, 1959.

# (i) Poultry Stock Improvement Plan

Under the plan, Animal Health Division is responsible for blood testing the adult birds of flock owners to ensure that such flocks are kept free from infection with Bacillary White Diarrhoea (Salmonella Pullorum). During 1959, 50 flocks involving 77,254 fowls were blood tested and only 19 positive reactors in 3 flocks were disclosed.

Reports during the year indicated that Salmonella Typhimurium had been isolated from chickens and calves in the County and Salmonella St Paul had also been isolated from fowls on one farm.

Figures of Tuberculosis Cases in the Division for the year ended 31st December, 1959 (Tuberculosis Order, 1958)

No. of suspected cases examined	• • •	• • •	7
No. of cases not amenable to the Order	• • •	• • •	4
No. of cases of chronic cough	• • •	•••	3
No. of cases of chronic cough	• • •	• • •	Nil
No. of cases of Tuberculosis of the udder	• • •	• • •	3
No. of cases of Tuberculosis emaciation	• • •	• • •	Nil
No. of cases of excreting tuberculous material	• • •	• • •	Nil
No. of cases of Tuberculous milk	•••		Nil
No. of cases which proved "advanced" on P.M.E.			2
_			I
<u>-</u>			
	No. of cases not amenable to the Order  No. of cases of chronic cough  No. of cases of chronic cough  No. of cases of Tuberculosis of the udder  No. of cases of Tuberculosis emaciation  No. of cases of excreting tuberculous material	No. of cases not amenable to the Order  No. of cases of chronic cough  No. of cases of chronic cough  No. of cases of Tuberculosis of the udder  No. of cases of Tuberculosis emaciation  No. of cases of excreting tuberculous material  No. of cases of Tuberculous milk  No. of cases which proved "advanced" on P.M.E.  No. of cases which proved "not advanced" on P.M.E.	No. of cases not amenable to the Order  No. of cases of chronic cough  No. of cases of Chronic cough  No. of cases of Tuberculosis of the udder  No. of cases of Tuberculosis emaciation  No. of cases of excreting tuberculous material  No. of cases of Tuberculous milk  No. of cases which proved "advanced" on P.M.E.  No. of cases which proved "not advanced" on P.M.E.

#### SECTION F

#### Miscellaneous

### Registered Nursing Homes

At the end of the year there were six nursing homes registered in the County, excluding Cheltenham Municipal Borough. These homes provided 101 beds for general cases. Visits of inspection are made by members of the Medical Staff and the conditions prevailing in the homes were satisfactory. The County Fire Prevention Officer has continued to inspect each home for the purpose of checking the maintenance of adequate fire prevention measures.

Cheltenham Municipal Borough continues to administer the powers of registration which were delegated to the Borough under Section 194 of the Public Health Act, 1936.

TABLE I—BIRTHS AND DEATHS

	BIRT				HS				DEATHS														
	Estimated	Live Births				Still Births			Total		Under 1 year		Infantile Mortality				Under 1 week						
Districts	Population	Leg.	Illeg.	Total	Rate per 1,000 Pop.	Leg.	Illeg.	Total	S.B. Rate per 1,000 Total Births	No.	Rate per 1,000 Pop.	Leg.	Illeg.	Total	Rate per 1,000 Live Births	Leg.	Illeg.	Total	Rate 1,000 Live Births	Leg.	Illeg.	Total	Rate 1,000 Live Births
Urban Charlton Kings Cheltenham M.B. Cirencester Kingswood Mangotsfield Nailsworth Stroud Tewkesbury M.B.	6,960 69,490 12,070 23,330 22,120 3,720 16,250 5,560	117 1,155 170 424 422 44 233 88	4 80 9 18 4 1	121 1,235 179 4 · 2 226 45 244 94	17.38 17.77 14.83 18.94 19.25 12.09 15.01	3 31 6 7 5 6 2		3 34 6 7 6 —	24.19 26.79 32.43 15.59 13.89 24.00 20.83	85 835 162 192 215 37 210 57	12.21 12.01 13.42 8.23 9.72 9.95 12.92 10.25	1 23 4 6 10 4 4		1 24 5 6 10 4 4	8,26 19,43 27,93 13,57 23,47 16,39 42,55	17 3 5 6 - 4 3		18 4 5 6 - 4 3	14.57 22.35 11.31 14.08 — 16.39 31.91	14 2 5 4 3 3		15 3 5 4 3 3	12.14 16.76 11.31 9.39  12.29 31.91
TOTAL U.D.	159,500	2,653	133	2,786	17.47	60	4	64	22.46	1,793	11.24	52	2	54	19.38	38	2	40	14.35	31	2	33	11.84
Rural Cheltenham Cirencester Dursley East Dean Gloucester Lydney Newent North Cotswold Northleach Sodbury Stroud Tetbury Thornbury Warmley West Dean TOTAL R.D.	29,700 15,640 17,270 20,920 43,920 12,310 8,540 20,390 8,180 41,670 27,240 6,770 27,260 15,300 17,890	536 265 272 333 760 173 146 333 105 695 391 121 450 297 265	21 18 9 19 29 11 7 14 8 25 17 3 26 5 11	557 283 281 352 789 184 153 347 113 720 408 124 476 302 276	18.75 18.09 16.27 16.83 17.96 14.95 17.91 17.02 13.81 17.27 14.98 18.32 17.46 19.74 15.42	9 5 4 11 21 7 1 10 9 9 2 8 3 4		9 5 4 11 22 1 7 2 11 9 2 8 3 5	15.90 17.36 14.04 30.30 27.12 5.40 — 19.77 17.39 15.05 21.58 15.87 16.53 9.83 17.79	287 132 189 226 493 131 90 206 93 385 77 293 126 197	9.66 8.44 10.94 10.80 11.22 10.64 10.54 10.10 11.37 9.24 12.37 11.37 10.75 8.23 11.01	10 4 2 7 15 5 1 5 2 9 4 4 5 4 9	- - - - - - - - - - - - - - - - - - -	10 4 2 7 15 6 1 6 2 10 4 4 6 4 9	17.95 14.13 7.12 19.89 19.01 32.61 6.53 17.29 17.70 13.88 9.80 32.26 12.60 13.24 32.61	9 4 2 5 10 5 4 1 6 3 4 3 3 8	- - - - - - - - - - - - - - - - - - -	9 4 2 5 10 6 - 5 1 7 3 4 4 4 3 8	16.16 14.13 7.12 14.20 12.67 32.61 	8 4 1 5 9 5 	- - - - - - - - - - - - - - - - - - -	8 4 1 5 9 6 4 1 5 2 4 2 2 7	14.36 14.13 3.56 14.20 11.41 32.61 — 11.53 8.85 6.94 4.90 32.26 4.20 6.62 25.36
TOTAL R.D.	313,000	5,142	223	5,365	17.14	95	4	99	18.12	3,202	10.42	86	4	90	16.77	67	4	71	13.23	-30	4		
County Totals	472,500	7,795	356	8,151	17.25	155	8	163	19.60	5,055	10.70	138	6	144	17.67	105	6	111	13.61	87	6	93	11.41





Districts	Scarlet Fever	Whooping Cough	Ac, P mye P		Measles	Diph- theria	Ac. Pneu- monia	Dysentery	Small- pox	Ac. Letha	
<b>Urban</b> Charlton Kings	5	_		_	128		5	ı			_
Cheltenham M.B.	32	10	_	_	764		37	19	_	_	
Cirencester	4	15	_	_	162	_	17	26	_	_	-
Kingswood	18	10	_	—	363	<del></del>	2	I	_		
Mangotsfield	46	9	_	_	671		5	3		I	
Nailsworth	2	3		_	42	<u></u>	2	8	_	_	
Stroud	3	69		_	320		20	7	_		
Tewkesbury M.B.	10		_	_	21	_	_	14	_	_	_
Totals U.D	120	116			2,471		88	79	_	I	
Rural Cheltenham	18	3	_	_	470	—	13	10		_	_
Cirencester	_	I	_		II2	_	10	11	_	_	Street Street,
Dursley	20	10	_		208		4		—	_	
East Dean	25	75			151	—	I	5	—	_	elicine (
Gloucester	96	26	_	_	495	_	II	8	_	_	
Lydney	9	7	<del></del>	_	137	_	I	4	_	_	
Newent	5	37	I	_	176	—	I	50	_	_	
North Cotswold	II	34	<u> </u>	_	221		16	_	_	I	
Northleach	3	I		_	154	—	9	_		—	
Sodbury	32	22	_	_	556	_	12	5	_	_	
Stroud	6	31		_	616	_	21	53		apparence	
Tetbury	_	_	_	_	125		3	_	_	_	
Thornbury	12	16	_	-	149	_	10	76	_	I	
Warmley	10	_	<u> </u>	_	202	_	5	ı	_	I	
West Dean	7	_	_		30	_	3		_	_	
TOTALS R.D	254	263	I		3,802	_	110	223		3	
County Totals	374	379	I		6,273	_	198	302	_	4	

C.P.—Chicken Pox M.—Malaria

# TIOUS DISEASE NOTIFICATIONS

****									
Para- Typhoid Fever	Erysipelas	Meningo- coccal Infection	Food Poisoning	Puerperal Pyrexia	Ophthal- mia Neona	Pul- monary	Tuberculosis  Meninges and CNS	Other	Other
			I	I	I	_			_
Growing		3	6	66	_	31	_	4	_
	I		_	8	_	2			25 C.P.
_	_	_	_	_	_	II		2	
_	2			I	<del></del>	II		2	
_	2	_		I		2	_		_
_	_	I		6		6	_		_
_	_		<del></del>	I		2			
	5	4	7	84	I	65		8	25 C.P.
_	4	I		9	_	10	I	_	1 M.
_	I			I	_	5	_	_	76 C.P.
	2			I	_	3	_	_	_
	4		I	4	_	6	_	_	
	5	2	_	4		31	_	2	_
_	I	ľ		_		5	_	_	_
—	I		I	2	_	5	_		_
	<b>!4</b>	_	=	5		I	_	Ι	_
	_		-	_	_	2			_
_	8	_	4	4	I	28	_	6	
	2	-		3		II	_	2	_
			2			I	-	I	_
	4	I	3	2		5	_	3	_
	I	_	I			3		_	_
	I	_			I	7		I	
	48	5	12	35	2	123	I	16	1 M. 76 C.P.
	53	9	19	119	3	188	ı	24	1 M. 101 C.P.
	Typhoid	Typhoid Fever       Erysipelas         —       —         —       I         —       2         —       2         —       4         —       4         —       4         —       4         —       5         —       1         —       4         —       14         —       8         —       2         —       4         —       4         —       1         —       48	Typhoid Fever         Erysipelas Infection           —         —           —         —           —         —           —         —           —         —           —         2           —         —           —         4           —         —           —         4           —         —           —         4           —         —           —         4           —         —           —         4           —         —           —         4           —         —           —         4           —         —           —         —           —         —           —         —           —         —           —         —           —         —           —         —           —         —           —         —           —         —           —         —           —         —           —         —           <	Typhoid Fever         Erysipelas Infection         Food Poisoning           —         —         —         I           —         —         —         I           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           —         —         —         —           — </th <th>Typhoid Fever         Erysipelas Infection         Food Poisoning Pyrexia         Puerperal Pyrexia           —         —         —         I         I           —         —         —         I         I           —         —         —         —         8           —         —         —         —         —           —         —         —         —         I           —         —         —         —         I           —         —         —         —         —           —         —         —         —         —           —         —         —         —         —         —           —         <t< th=""><th>Typhoid Fever         Erysipelas coccal Infection         Food Poisoning Puerperal Pyrexia Neona         Opmina Neona           —         —         —         I         <td< th=""><th>  Typhoid Fever   Erysipelas   Coccal Infection   Poisoning   Puerperal Optimal mia Neona   Puerperal Neona   Puerperal</th><th>  Typhoid Fever   Erysipelas   Coccal Infection   Poisoning   Pyrexia   Pyrexia   Pyrexia   Pulmian   Pulm</th><th>  Typhoid   Erystpelas   Coccal   Food   Puerperal   Meninges   Me</th></td<></th></t<></th>	Typhoid Fever         Erysipelas Infection         Food Poisoning Pyrexia         Puerperal Pyrexia           —         —         —         I         I           —         —         —         I         I           —         —         —         —         8           —         —         —         —         —           —         —         —         —         I           —         —         —         —         I           —         —         —         —         —           —         —         —         —         —           —         —         —         —         —         —           — <t< th=""><th>Typhoid Fever         Erysipelas coccal Infection         Food Poisoning Puerperal Pyrexia Neona         Opmina Neona           —         —         —         I         <td< th=""><th>  Typhoid Fever   Erysipelas   Coccal Infection   Poisoning   Puerperal Optimal mia Neona   Puerperal Neona   Puerperal</th><th>  Typhoid Fever   Erysipelas   Coccal Infection   Poisoning   Pyrexia   Pyrexia   Pyrexia   Pulmian   Pulm</th><th>  Typhoid   Erystpelas   Coccal   Food   Puerperal   Meninges   Me</th></td<></th></t<>	Typhoid Fever         Erysipelas coccal Infection         Food Poisoning Puerperal Pyrexia Neona         Opmina Neona           —         —         —         I <td< th=""><th>  Typhoid Fever   Erysipelas   Coccal Infection   Poisoning   Puerperal Optimal mia Neona   Puerperal Neona   Puerperal</th><th>  Typhoid Fever   Erysipelas   Coccal Infection   Poisoning   Pyrexia   Pyrexia   Pyrexia   Pulmian   Pulm</th><th>  Typhoid   Erystpelas   Coccal   Food   Puerperal   Meninges   Me</th></td<>	Typhoid Fever   Erysipelas   Coccal Infection   Poisoning   Puerperal Optimal mia Neona   Puerperal	Typhoid Fever   Erysipelas   Coccal Infection   Poisoning   Pyrexia   Pyrexia   Pyrexia   Pulmian   Pulm	Typhoid   Erystpelas   Coccal   Food   Puerperal   Meninges   Me

CAUSES OF AND AGES AT DEATH

Total	22 10 10 10 10 10 10 10 10 10 10	5 055
65 years and	23. 24. 25. 25. 25. 25. 25. 25. 25. 25. 25. 25	3,591
45 - 64	24 4         2 6 6 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6 1 6	1,041
25 - 44	\[ \formula \	182
15 - 24		43
5 - 14		32
1 - 1		22
Under		144
Causes of Death	Tuberculosis, respiratory  2 Tuberculosis, other  3 Syphilitic disease 4 Diphtheria 5 Whooping cough 6 Meningococcal infections 7 Acute poliomyelitis 8 Measles 10 Malignant neoplasm, stomach 11 Malignant neoplasm, breast 12 Malignant neoplasm, breast 13 Malignant neoplasm, uterus 14 Other malignant and lymphatic neoplasms 15 Leukaemia, aleukemia 16 Diabetes 17 Vascular lesions of nervous system 18 Coronary disease, angina 19 Hypertension with heart disease 20 Other heart diseases 21 Influenza 22 Influenza 23 Pneumonia 24 Bronchitis 25 Other diseases of respiratory system 26 Other diseases of prostate 27 Castritis, enteritis and diarrhoea 28 Nephritis and nephrosis 29 Pregnancy, childbirth, abortion 20 Cher defined and ill-defined diseases 31 Congenital malformations 32 Other defined and ill-defined diseases 33 All other accidents 34 Suicide 35 Suicide 36 Homicide and operations of war	TOTALS